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WELFARE in REVIEW

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U. S. DEPARTMENT OF
HEALTH, EDUCATION, AND WELFARE

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Trends in Public Action for the Aging

MARVIN J. TAVES and HERMAN B. BROTMAN*

NEW AND ENLIGHTENED public action on behalf of the elderly has become an important part of the current scene in this country. Such action has developed and continues to develop in response to the multitudinous needs of the growing population of older persons in an expanding economy. Federal and State governments for their part have accepted significant responsibilities, such as the public assistance programs that provide financial aid, social services, and medical care for the indigent; social insurance; improved housing; consumer education and protection; and special community facilities for the aging.

FEDERAL LEGISLATION

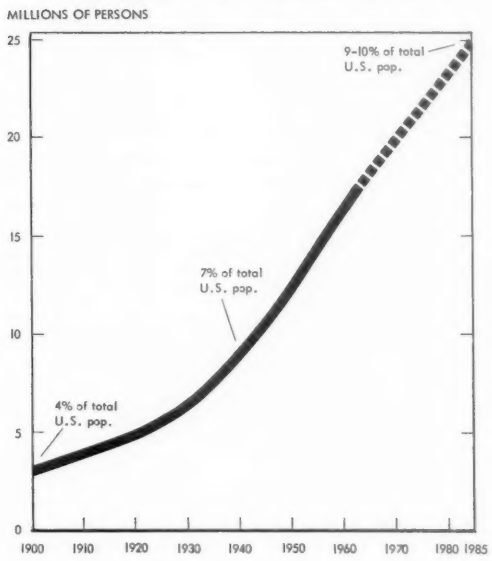
During 1964, many pieces of legislation that applied to the general population also met some of the needs of the elderly; the Economic Opportunity Act was one. The programs authorized by this act hold promise for the elderly in the provisions for community action programs, adult basic education, work experience programs, and volunteer service. The Food Stamp Plan legislation expanded the program designed to raise the dietary level of poor people, including many elderly.

The various reductions in taxes authorized by the Revenue Act of 1964 will result in annual tax savings of about $675 million to older persons. The special tax provisions for older persons include a double exemption, minimum standard deduction, medical expense deduction, retirement income credit, and special treatment of gains from the sale of a home by a taxpayer 65 years of age or older.

The 1964 amendments to the Hill-Burton Act extended the program for construction of medical facilities for 5 years and increased the authorization of funds for the construction of nursing homes and other long-term care facilities from $40 million to $70 million a year.

The Veterans Administration was authorized in 1964 to construct not less than 4,000 nursing home beds for its facilities. In addition, the Veterans Administration

The increasing number of persons 65 and over



Source: Bureau of the Census.

*Dr. Taves is Assistant Director of the Office of Aging and Chief of its Division of Field Services; Mr. Brotman is Chief of Reports and Analysis, Office of Aging.

can now make grants to States of up to $5 million a year to construct additional nursing home beds in State soldiers homes, and also make payments for the care of veterans in private nursing homes. Pensions to veterans and their dependents were increased by about $100 million for the calendar year 1965.

Legislative action specifically directed to the elderly included the Housing Act of 1964. This law increased direct loan funds for housing for the elderly, expanded public housing and extended occupancy to single elderly persons, opened FHA mortgage insurance to nonprofit nursing homes, increased mortgage ceilings on rental and related housing for the rural elderly, and authorized rehabilitation loans to aged and other persons in urban renewal areas and relocation payments to those displaced.

Two significant measures were taken to combat discrimination in employment against the older person. An executive order (No. 11141 of February 12, 1964) declared it the policy of the executive branch that contractors or subcontractors awarded Federal contracts shall not practice discrimination in employment against persons because of their age.

A section in the Civil Rights Act of 1964 directs the Secretary of Labor to make a full and complete study of the factors which might tend to result in discrimination in employment because of age and to make recommendations for legislation to prevent such arbitrary discrimination.

In addition to these legislative advances, a number of other Federal activities are particularly significant for older persons.

CONTINUING PROBLEMS AND PROGRAMS

Income

In 1963, almost two-fifths of the older men and more than four-fifths of the women had no income at all or less than $1,500 a year.

Many depend on the various income maintenance programs administered or supported by the Federal Government to help replace the income lost through retirement or disability. The old-age, survivors, and disability insurance program is the largest of these. Each month almost 20 million beneficiaries and their dependents receive almost $1.4 billion in OASDI benefits. Almost 14 million beneficiaries are aged 65 or over and almost 2 million more are aged 62 through 64.

Percent distribution of older families and persons with some money income in 1963 by amount of income

Income class	By family status				Persons			
	Families		Unrelated individuals		Men		Women	
	Percent	Cumulated	Percent	Cumulated	Percent	Cumulated	Percent	Cumulated
Total	1/100.0	---	2/100.0	---	3/100.0	---	4/100.0	---
Under $1,000	6.0	6.0	35.2	35.2	16.8	16.8	56.2	56.2
$1,000 - 1,499	9.2	15.2	26.8	61.9	19.4	36.2	20.8	77.0
$1,500 - 1,999	11.0	26.2	15.4	77.2	14.0	50.2	9.0	86.0
$2,000 - 2,499	10.3	36.5	8.6	85.7	13.6	63.8	4.8	90.8
$2,500 - 2,999	8.6	45.1	3.3	89.0	7.7	71.5	1.7	92.5
$3,000 - 3,999	12.8	57.8	3.3	92.3	8.7	80.2	2.7	95.2
$4,000 - 4,999	8.9	66.7	2.3	94.6	6.4	86.6	1.5	96.7
$5,000+	33.3	100.0	5.4	100.0	13.4	100.0	3.3	100.0

1/ Includes 6.8 million families with head aged 65+.
2/ Includes 4.3 million persons aged 65+ living alone or with non-relatives.
3/ Includes 7.4 million men aged 65+ with some income (98.4 percent of all men 65+).
4/ Includes 7.6 million women aged 65+ with some income (79.8 percent of all women aged 65+).

More than 9 out of 10 Americans aged 65 and over are either drawing old-age and survivors benefits or are eligible to draw them if they retire. With retirement benefits averaging only $129 per month per couple, however, many aged beneficiaries without additional sources of income have great difficulty maintaining a decent level of living. More than 7 percent of the beneficiaries aged 65 and over receive some public assistance under the old-age assistance and medical assistance for the aged programs.

The State-Federal old-age assistance programs are a significant source of income maintenance; in addition, they provide medical care and other services. Some 2.2 million persons over 65 are currently receiving old-age assistance. Another 230,000 receive medical assistance for the aged, and a significant number receive aid under other public assistance programs for the blind, disabled, and families with dependent children. Each State determines, according to its standards, how much assistance recipients will receive. A study of the status of the Nation's elderly shows a need to reexamine these State standards to be sure that the aged are provided assistance sufficient for a decent level of living.

Some 3 million persons 65 years and over (about a quarter of the older men and a tenth of the older women) are still in the labor force. On the average, older persons working have more than twice the income of those retired. Workers retire for a number of reasons. In a 1963 survey of the aged, the Social Security Administration asked men who had retired since 1957 the reason for retirement. Of the 63 percent who said they had made their own decision, 35 percent said they retired because of poor health, 19 percent preferred leisure, and 9 percent gave other reasons. The remaining 37 percent who had been retired by their employer were made up of 19 percent who had reached the compulsory age, 6 percent who were in poor health, 8 percent whose jobs were discontinued or who were laid off, and 4 percent who were retired for other reasons. The Department of Labor, through the affiliated State employment service agencies and through the Office of Manpower, Automation and Training, is taking action to help older workers find jobs, carry out factfinding on employment of older workers, and promote acceptance of the concept that ability is ageless.

Total OASDI beneficiaries aged 65 and over and OAA recipients, 1948-64

Month and year	OASDI beneficiaries aged 65 or over		OAA recipients	
	Total number 1/	Percent receiving OAA	Total number	Percent receiving OASDI
June 1948	1,457,000	10.0	2,365,200	6.1
Sept. 1950 ...	2,192,000	12.6	2,809,500	9.8
Aug. 1951	3,174,000	11.9	2,727,900	13.8
Feb. 1952	3,404,100	12.0	2,653,500	15.1
Feb. 1953	4,010,000	10.7	2,571,500	16.3
Feb. 1954	4,800,900	9.7	2,574,300	18.0
Feb. 1955	5,640,100	8.7	2,549,600	19.2
Feb. 1956	6,490,400	8.0	2,534,300	10.4
Feb. 1957	7,127,000	7.8	2,505,300	22.2
Feb. 1958	8,420,000	7.1	2,470,000	24.2
Mar. 1959	9,378,700	6.9	2,429,800	26.7
Feb. 1960	10,134,600	6.7	2,368,800	28.5
Feb. 1961	10,869,600	6.6	2,310,000	31.0
Feb. 1962	11,668,000	6.5	2,236,400	33.7
Feb. 1963	12,488,000	6.5	2,195,800	37.2
Feb. 1964 2/..	13,122,900	6.7	2,166,000	40.7

1/ Estimated by the Social Security Administration.
2/ Data for OAA includes March data for 5 States and January data for New York City.

Health

To many older persons poor health is of even greater concern than insufficient income. Older persons need hospital care three times more often than younger persons, their hospital stay is twice as long, and their medical bills are twice as high; yet their income is only half that of persons under 65.

Hospitalization insurance is carried by only half of all older persons; fewer have surgical or medical insurance. Of all older persons discharged from short-stay hospitals in 1958-60, 51 percent had some part of the hospital bill paid by insurance. In only 30 percent of the cases discharged did the insurance payment cover as much as three-fourths of the bill.

Public welfare departments in the 1963-64 fiscal year paid vendors of health

services $422 million for care of old-age assistance recipients and $382 million for medical assistance for the aged. Well over half of these totals came from Federal funds. Eligibility requirements and level of payments vary considerably among the States, and not all States participate in both programs.

A large portion of the direct hospital and medical care provided in Veterans Administration hospitals is for those past age 64.

The Public Health Service supports demonstration programs in therapeutic and preventive services for the aging. Large sums are being expended for research and action on the leading causes of death and disability, particularly heart disease, cancer, mental illness, arthritis, rheumatism, and diabetes; on nutrition; rehabilitation; and other health and related problems of older adults.

The President's Council on Aging is sponsoring a project (under the leadership of the Nursing Home Branch of the Public Health Service) to analyze the costs of nursing home care. A model law on licensing standards for nursing homes is being developed with the Council of State Governments.

Housing

The 1960 census showed that a fifth of the housing units occupied by families with at least one member aged 60 or over were substandard. Progress since 1960 has been impressive. Compared with the previous 5 years, there has been a ninefold increase in total low-rent housing units constructed with Federal aid for older persons. In 1965, about 140,000 dwelling units will be built for older persons with limited financial resources. Nevertheless, progress so far has reached only a fraction of the poorly housed elderly. The Housing Act of 1964, described above, will no doubt contribute significantly to future gains.

Social Services

In addition to better health care, income maintenance, and housing, older persons also need a great variety of social services. The Public Welfare Amendments of 1962 made possible a considerable extension of social services to the elderly by offering 75 percent Federal sharing in their costs. Some examples of the services possible under the 1962 amendments to current, former, and potential recipients of old-age assistance are: (a) protective arrangements in cases where elderly persons are unable to manage their money or other affairs; (b) transfer of the elderly from institutions (mental hospitals, for example) back to their home communities; (c) homemaker services; (d) friendly visiting services by volunteers; and (e) foster family care services.

Under the leadership of the President's Council on Aging, an interdepartmental committee is exploring a wide variety of subjects bearing on the social welfare problems of older people. Another deals with developing and expanding multipurpose activity centers for older adults. Other committees are looking into what can be done in regard to social isolation, adult education, consumer information, rental housing standards, and homemaker services.

To increase the scientific knowledge with which new and more effective programs can be developed on behalf of the aging, research and demonstration projects are being carried out under the Cooperative Research and Demonstration Grants Program, which is administered by the Welfare Administration with the cooperation of the Social Security Administration. More than a dozen research projects on aging have been or are being supported, and final reports have been submitted on two projects. One examined the factors leading to decisions that result in admission of older persons to homes for the aged; the other revealed trends in early retirement in American industry.

A study of types of care needed by patients in nursing homes in relation to sources of support and a second study of the needs of a low-income aged population in a public housing project are nearing completion. Two other current

projects concern the relationships of the aged with friends and relatives and will explore the problem of isolation of the aged. The several projects on the subject of retirement include a longitudinal study of the effects of retirement on workers, an assessment of the influence of retirement plans on savings, two projects on preretirement education, and a study of withdrawal from active occupational roles in rural areas.

Office of Aging

The Office of Aging of the Welfare Administration is assigned broad overall responsibilities. Its principal functions are:

1. To provide stimulation, guidance, and technical assistance at Federal, State, and community levels to individuals and organizations whose efforts are devoted to developing knowledge, services, facilities, and opportunities for training personnel in the broad field of aging;
2. To serve as a focal point for collecting and diffusing knowledge about aging and the older population and information on new approaches and activities designed to improve the well-being of older people; and
3. To work toward the coordination of efforts of Federal agencies within the Government and with outside organizations.

STATE LEGISLATION

Increasing concern for the aging and growing interest in guaranteeing them more opportunities to share in community life are reflected in legislation enacted by the States during 1963-64. This legislation dealt particularly with community organization, social services, public assistance, tax relief, and retirement.

Legislation establishing a State commission on aging was reported for Hawaii, Mississippi, Florida, Montana, and West Virginia. Several State commissions had their authority extended to enable them to stimulate local community programs more effectively. For example, Louisiana authorized establishment of parish councils on aging through charters issued by the governor after approval of the application by the Louisiana Commission on Aging. Any five or more citizens of a parish may associate themselves for the purpose of making an application to the commission for a charter.

Connecticut enabled municipalities to establish committees to study the needs of, and coordinate programs for, the aging and to make appropriations to cover the expenses of such committees.

Massachusetts increased the leisure time activities allowance under the Old-Age Assistance Law. Each local board is to include in the budget of each recipient $6 monthly in addition to the budgetary requirements granted under the previous provisions and an item to be known as a transportation allowance, which adds another $5 monthly.

Legislation relating to health included an act passed in Oregon which permits and encourages insurance companies to combine resources and experience in order to make possible the maximum medical, accident, and health insurance coverage for residents 65 years of age or older. Similar action was taken by New York, Texas, and New Mexico.

Income tax legislation in California removed the limitation on exemption of payments for medical care, medicines, and drugs for those who had reached age 65. In Oregon, the value of all benefits under the Social Security Act was exempted from taxation.

A unique approach is found in the Wisconsin legislation which grants property tax relief through a system of income tax credits and refunds to persons 65 or over who own or rent their homes, provided their total gross income is under $3,000. A Georgia resolution grants to each person 65 years of age or over who does not have a total income exceeding $3,000 per year an exemption of $4,000 on a homestead which he owns and occupies.

Housing was the subject of legislation in at least seven States. An interim study of promotional and advertising practices involving the sale of retirement

subdivisions was authorized by California. Florida created an installment land sales board to protect the public in purchases of land when an installment contract is used. Promoters of installment land sales are required to register with the board, and all promotional publications must be filed with the board before distribution. Criminal and civil liability for violation of the act is established. In an effort to prevent misrepresentation in land sales, Oregon now requires an official notice from those who intend to offer for sale in Oregon subdivided lands located within or without the State. Each prospective purchaser or lessee will be furnished a report of an investigation of the property by the State real estate commissioner.

Discrimination in employment against persons because of age, up to age 65, was declared contrary to State policy in Texas, a harmful practice in Maryland, and an unfair employment practice with application extended to employment agencies and labor organizations in Connecticut.

State grants to communities to assist in the development of facilities and services for older persons were continued or initiated in California, New Jersey, and Pennsylvania. Also in Pennsylvania the State Office of Aging was assigned the operation of the first coordinated regional center to screen all applicants for medical or economic assistance for health, economic, social, and housing needs.

CONCLUSION

A review of recent action and pending legislation in both Congress and the State legislatures reflects increased efforts and more effective efforts on behalf of the aging. There appears to be a growing understanding of the older person, his potentials, and his needs as well as increased recognition of the resources available and of their effective application. The lessons learned from research and demonstration programs are receiving broader application. Probably most significant is the growing awareness of the dynamic character of aging and the consequent need to plan in terms of a new generation of older people differing in health, education, cultural background, economic needs, and abilities from their predecessors.

Trends in Life Expectancy, 1900-62

Between 1900 and 1962, life expectancy at birth increased 22.7 years, from 47.3 to 70 years of age. Life expectancy for nonwhite babies (see table 1) is still considerably less than for whites, but the rate of increase for nonwhites has been much faster. Life expectancy for all females has been increasing faster than for males, from an advantage of 2 years in 1900 to 6.6 years in 1962.

At the older ages, life expectancy has increased comparatively little. Table 2, which shows life expectancy at ages 60 and 65, indicates that life expectancy for 60-year-old white males increased only 1.6 years (4.7 years for females) between 1900-02 and 1962. Thus, the gap between life expectancy of older males and of older females also continues to grow.

It is evident that the increase in the number and the proportion of older persons in the population is a result, primarily, of improved life expectancy in infancy and childhood. This means that more people reach old age rather than that they live longer after they reach old age.

The consequences are:

1. There will continue to be large and increasing numbers of older persons in our population. They constitute a group particularly vulnerable to income and health problems.

2. People will be spending more of their lives in retirement (and in preparation for their vocations) as a result of both increasing life expectancy and changes in the economy.

3. Females will continue to outnumber males at practically all adult age levels and the gap will grow even greater with

Table 1. Life expectancy (average remaining years of life) at birth, 1900-62

Year	All			White			Nonwhite		
	Both sexes	Male	Female	Both sexes	Male	Female	Both sexes	Male	Female
1900 1/	47.3	46.3	48.3	47.6	46.6	48.7	33.0	32.5	33.5
1910 1/	50.0	48.4	51.8	50.3	48.6	52.0	35.6	33.8	37.5
1920 2/	54.1	53.6	54.6	54.9	54.4	55.6	45.3	45.5	45.2
1930	59.7	58.1	61.6	61.4	59.7	63.5	48.1	47.3	49.2
1940	62.9	60.8	65.2	64.2	62.1	66.6	53.1	51.5	54.9
1950	68.2	65.6	71.1	69.1	66.5	72.2	60.8	59.1	62.9
1960	69.7	66.6	73.1	70.6	67.4	74.1	63.6	61.1	66.3
1962	70.0	66.8	73.4	70.9	67.6	74.4	64.1	61.5	66.8
Increase: 1900-62	+22.7	+20.5	+25.1	+23.3	+21.0	+25.7	+31.1	+29.0	+33.3

1/ Based on data on deaths in 10 States and the District of Columbia.
2/ Based on data on deaths in 34 States and the District of Columbia.

Table 2. Life expectancy (average remaining years of life) at ages 60 and 65, 1900-62

Year	At age 60				At age 65			
	White		Nonwhite		White		Nonwhite	
	Male	Female	Male	Female	Male	Female	Male	Female
1900-02 1/	14.4	15.2	12.6	13.6	11.5	12.2	10.4	11.4
1909-11 1/	14.0	14.9	11.7	12.8	11.3	12.0	9.7	10.8
1919-21 2/	15.3	15.9	14.7	14.7	12.2	12.8	12.1	12.4
1929-31	14.7	16.1	13.2	14.2	11.8	12.8	10.9	12.2
1939-41	15.1	17.0	14.4	16.1	12.1	13.6	12.2	14.0
1949-51	15.8	18.6	14.9	17.0	12.8	15.0	12.8	14.5
1961	16.1	20.0	15.3	18.0	13.1	16.1	13.0	15.5
1962	16.0	19.9	15.0	17.7	12.9	16.0	12.7	15.2
Increase: 1900-62	+1.6	+4.7	+2.4	+4.1	+1.4	+3.8	+2.3	+3.8

1/ Based on data on deaths in 10 States and the District of Columbia.
2/ Based on data on deaths in 34 States and the District of Columbia.

advancing age. Even now, more than half of the women aged 65 and over are widows.

4. More and more of the older population will have living parents and still older relatives.

In any investigation that involves time and age, the practicality as well as the relative advantages of the longitudinal and the cross-sectional approaches must be taken into account. In estimating remaining years of life, the most common figure, "life expectancy," represents the cross-sectional approach since it is based on the assumption that the current death rate at each specific age will continue unchanged into the future. A companion figure based on a longitudinal approach, sometimes called "survivorship," makes assumptions about changes in death rates in the future and uses actual length of life for periods in the past by following through groups born in the same year.

For the purposes of this brief analysis, "life expectancy" estimates are most appropriate since they involve the least number of assumptions. It should be remembered, however, that with the continuing long-range improvement in death rates the chances are that people, on the average, will live significantly longer than these life expectancies.

--Herman B. Brotman,
Office of Aging

Feeding a Family on a Public Assistance Budget

HILDA SIFF*

"FROM THE START, I had a great many advantages which the average adult on welfare cannot claim. As a healthy woman of forty-eight, I am allowed to eat any kind of food. I have no children at home pleading for ice-cream and candy, and I do not have to borrow from the food money when the landlord hammers on the door for the rent. My kitchen is equipped with a variety of modern utensils and a good stove with an oven that works. I have . . . a fair understanding of nutrition. Also, I've been cooking for a long time."[1]

So goes an account of an "experiment" conducted by Mrs. Alice B. Spalding, a resident of Washington, D.C., who decided to test for herself "how a relief recipient eats on what he is given." Her month's experience on a public assistance food budget is recorded in the form of a diary; it provides us with interesting detailed insights into the adjustments that a middle-class housewife would have to make in order to live within the financial limitations of the public assistance recipient.

The adjustments made by real public assistance clients, who live in circumstances quite different from Mrs. Spalding's, are revealed in a study[2] conducted in 1963-64 by the Nutrition Association of Greater Cleveland in cooperation with the Cuyahoga County (Ohio) Welfare Department. A systematic sample of 195 families with children was drawn from the Aid to Dependent Children and General Assistance caseloads of the Cuyahoga County Welfare Department. The mother of the family was interviewed by a caseworker, using a schedule developed by the Nutrition Association. She reported what and how much the family had eaten at meals and between meals during the day preceding the interview. Nutrition experts in the Association and in the Cleveland Division of Health analyzed the findings.

Following a preliminary report of the entire sample, the investigators made a more refined analysis of the 100 families in the sample whose answers to the questionnaires provided information that was definite enough to allow calculation of amounts of nutrients in the diet. This sample of 100 families included 600 persons, of whom 446 were children.

THE STANDARD

The standard against which the diets were measured was set at 66.7 percent of the National Research Council's Recommended Allowances for Dietary Intake. This percentage was used because 100 percent of the recommended allowances has a "margin of sufficiency above average physiological requirements to cover variations among individuals." Those diets below 66.7 percent of the NRC allowances in one or more nutrients were judged to be "substandard"; diets that were at or above the 66.7 percent level in all seven nutrients were classified as "marginal." (Families that were con-

*Division of Research, Welfare Administration.

[1]Spalding, Alice B.: "Eating Low on the Hog," Harper's Magazine, March 1965.

[2]Food Intake of Public Assistance Families. Nutrition Association of Greater Cleveland, Cleveland, Ohio, 1964.

sidered to have a substandard diet were not necessarily malnourished. Nutritional status must be judged on the basis of physical, biochemical, and clinical observations as well as food intake. This study did not undertake to make such judgments.)

FINDINGS

Of the 100 families, 80 percent were found to have substandard diets. Eighty-two percent of the children were in families with substandard diets; in terms of the ages of the children, 83.2 percent of the children under 12 years of age were in families with substandard diets.

Factors Related to Quality of Diet

Various factors, including per capita income, per capita food-purchasing power (cash allotted for food plus food stamps), race, education of the mother, and family size, were examined to try to determine which, if any, were related to the quality of the diet.

As might have been expected, there was a significant relationship between per capita income, food-purchasing power, and quality of diet, with food-purchasing power the more significant factor. Of 41 families with per capita food-purchasing power of under $17 per month, 40 families, or 97.6 percent, were in the substandard diet group (table). Of the 53 families with less than $30 per capita monthly income, 88.7 percent had substandard diets.

Quality of diet related to monthly food-purchasing power per capita in 100 families receiving public assistance

Monthly food-purchasing power per capita	Quality of diet					
	Marginal		Substandard		Total	
	Number	Percent	Number	Percent	Number	Percent
Under $17 ($8 - $16)	1	2.4	40	97.6	41	100
$17 and over ($17 - $31)	19	32.2	40	67.8	59	100
Total ..	20		80		100	

The importance of food stamps as a factor in improving the quality of the diet cannot be underrated: all 20 families who were classified as having a marginal diet reported that they used food stamps. The stamps were not enough, however--86.2 percent of the families with substandard diets also used this form of food supplementation. The data unfortunately do not indicate how many of the marginal diets would have been substandard had the food stamps not been available.

How is the size of the family related to the quality of diet? The data show that the larger the family, the higher the chances of having a substandard rather than a marginal diet. Of the families with between one and three members, 71.4 percent had substandard diets, while the diets of 83.3 percent of the families with seven or more members were substandard.

Another significant factor was the education of the mother. Although the relationship between income, food-purchasing power, and quality of diet held, the mother who was a high school graduate apparently managed better. Whereas 32.2 percent of all families with food-purchasing power over $17 per capita per month had marginal diets, 62.5 percent of those families in which the mother was a high school graduate had marginal diets.

Fifty percent of the white families with food-purchasing power over $17 had marginal diets compared with only 26.7 percent of Negro families; the significance of this difference might be questioned, however, because of the small number of white families (18 out of 100) in the sample. Cross-tabulations of race with education and size of family would be needed before any real significance could be attributed to this difference. Unfortunately, the report of the study does not provide such cross-tabulations.

Other Factors

The burden of managing with limited food allowances was increased by other factors. Two-thirds of the families had inferior facilities for preparing meals. One-third of the families had inadequate

refrigerators, necessitating shopping for perishables daily or several times a week and making it difficult for them to take advantage of sales. Twenty-two percent of the families had stoves which did not work properly. A third of the families did not have enough dishes to serve the family, and a quarter did not have enough pots and pans.

Seventy-six percent of the babies under 1 year had special food of some kind that was different from the rest of the family. This practice increased the food costs.

IF THEY HAD MORE MONEY

Although some families appear to have managed better than others on similar budgets, the low nutritive quality of the diets was universal. The main factor is obviously lack of money. It apparently is not ignorance of what the diet should contain. For when asked what foods they would buy if they had more money, 69 percent of the mothers said they would buy more fruit and vegetables. In view of the fact that four servings a day of fruit and vegetables are recommended, and 87 percent of these families had less than that, these women apparently knew what they needed. Similarly, 60 percent said they would buy more and better meat, and 29 percent said they would buy more milk.

IMPLICATIONS

"Shopping day! How I look forward to Friday and the excitement of going marketing. I plot and plan for hours and read the food ads in Thursday's paper," writes Mrs. Spalding. This points up, by contrast, another limitation that most mothers on assistance face: while they might manage better than they do if they could afford the time to "plot and plan for hours," how many of them can? And, for the one-third of the mothers in the Cleveland study without adequate refrigerators, there would be little profit in it. In a another part of her article, Mrs. Spalding describes the "delicious" bread she baked using the recipe in the Department of Agriculture's "Family Meals at Low Cost" and "leaning heavily on Fanny Farmer's instructions." Can we expect this kind of sophistication in the public assistance recipient? Even with guidance from the Department of Agriculture and Fanny Farmer (price $5.95), how many mothers of large families (49 percent of the families in the Cleveland study had six or more members), can devote almost 5 hours to making bread? In order to maintain a decent diet and keep within her budget, Mrs. Spalding found that time was an indispensable commodity, but time is sorely lacking for many of these mothers with large families.

The findings of this study seem to make it obvious that the first need for an adequate diet is enough money to buy enough of the right kinds of food. But other important needs are revealed also: adequate refrigerators and stoves, enough pots and dishes, some guidance in family nutrition and home management.

The final implication is clearly indicated by Mrs. Spalding: "Although I survived my month on welfare rations, I was delighted when it ended. For me, it was an experiment and it's over. For too many others, it is a continuing way of life."

Legal Services for the Poor

THE LEGAL NEEDS of the poor and possible ways of meeting these needs more effectively were explored by the first nationwide Conference on the Extension of Legal Services to the Poor, held November 12-14, 1964, in Washington, D.C. The conference, sponsored by the Office of Juvenile Delinquency and Youth Development of the Welfare Administration, had the immediate aim of furthering cooperation between lawyers and social workers in their efforts to ameliorate the conditions of the poor. About 150 persons attended, including representatives of law schools, social workers, jurists, welfare officials, and staff from community development projects.

In her welcoming address, U.S. Commissioner of Welfare Ellen Winston noted the particularly difficult position of the poor in regard to legal problems. An income that cannot adequately provide for basic daily needs has no margin for legal expenses. The general lack of education among the poor makes them more likely victims of injustice and exploitation. At the same time, as the country grows in population and complexity, more laws and regulations are inevitably instituted, and thus there are more instances in which people require legal help. Dr. Winston directed special attention to legal safeguards needed by the 8 million "poorest of the poor" who receive public assistance under laws and requirements which vary from State to State and some of which change from year to year:

> "We must see that their legal rights are not denied to them; that the provisions for their help and protection which are written into our laws and policies are not obviated by practice. In the majority of situations affecting these people across the Nation, this problem does not arise; but we have not fully evaluated or explored corrective mechanisms to take care of such problems when they do arise, or taken steps fully to protect people from any infringements of their rights under these programs."

The 1962 Public Welfare Amendments were cited particularly by the Commissioner as a means available to the States in helping to meet the needs of the poor for legal services. As one example she pointed out that States and localities could make available protective services to the aged who are no longer fully capable of managing their own affairs. Under the 1962 provisions, States can obtain 75 percent Federal financing for such services. Dr. Winston also mentioned the demonstration projects under the Juvenile Delinquency and Youth Offenses Control Act of 1962 and the community action programs under the Economic Opportunity Act of 1964 as offering opportunities for meeting legal needs of the poor.

Attorney General Nicholas deB. Katzenbach noted in his address that while major steps are being taken to protect the rights of poor persons accused of a crime, we have just begun to

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The complete proceedings of the Conference on Extension of Legal Services to the Poor were recently issued by the Office of Juvenile Delinquency and Youth Development. Copies are available from the Superintendent of Documents, Government Printing Office, Washington, D.C. 20402, at 60 cents each (Catalog No. FS 142:L52).

give serious attention to their broader, more common legal needs:

> "There are large numbers of poor people who discover that they have a binding obligation to pay a finance company for furniture never delivered or for a TV set that never worked. There are large numbers whose cars or washing machines are repossessed after months of payments--who have no idea they are entitled to the return of their equity. There are large numbers whose public assistance is reduced or revoked--who have no concept of their rights of appeal."

Making their rights known to the poor is one of the major problems, Mr. Katzenbach said. Second, he warned that even if rights are known they can provide little protection if they are entangled in a maze of technicalities. This is particularly true for the poor, who cannot "walk through life with a lawyer at their side." Third, protection of rights depends on advocacy, and their must be lawyers from all parts of the law who are willing to represent the poor man in trouble. Mr. Katzenbach placed special emphasis on his fourth point:

> "For rights to be worth anything, they must be honored--without lawyers; courts are not the only forums in which rights are adjudicated. There are administrative proceedings, there are dealings with landlords, merchants, social workers, and welfare officials--with all the people whose decisions can deeply change the lives of the poor. It is in these areas, far more often than in the courts, that the poor person needs a counselor and an advocate."

LEGAL NEEDS

Professor Monrad Paulsen of the Columbia Law School, speaking on family law, observed that there are two legal systems--one for persons with means, and one for those without. This is manifested in a variety of ways, he said, such as the stipulation of additional requirements before legal assistance will be provided to the poor (as in divorce cases), and the options available to the wealthy (such as private restitution to avoid having their children brought before the juvenile court) but not to the poor. Persons of wealth rarely have contact with neglect proceedings, he pointed out. He recommended that an especially close look be given to neglect cases when needs for legal assistance for the indigent are being ascertained.

The relation of the poor to government was examined by Edward V. Sparer, Director of the Legal Services Unit, Mobilization for Youth. He noted that as government has assumed a more active role in the lives of citizens through various laws and programs, the poor person's primary contact with the law has shifted from courtrooms to the anterooms of public agencies, where he awaits determinations that may vitally affect his life.

To indicate the scope of the legal problems under these new circumstances, Mr. Sparer recounted numerous issues that have been raised throughout the country in regard to public assistance administration, such as "suitable home" provisions, "man-in-the-house" rules, and "midnight raids" on clients. He related how legal representation for families denied public assistance in New York helped correct instances of misinterpretation by assistance workers of that State's "welfare abuses" law.

In expounding several major points on the relationship between poverty and law, Miss Elizabeth Wickenden of the National Social Welfare Assembly pressed home the point that public assistance is a matter of entitlement under law. Because of the beneficent purposes of public welfare, the possibilities of oppressive practices are often overlooked, she said.

Miss Wickenden offered four basic propositions underlying the relationship of the poor to the law:

1. The poor in America are a minority group, and a primary function of law is protection of minority groups against oppression, even in the form of "beneficent despotism" of the majority.

2. In an affluent, highly industrialized society, laws and institutions are the essential weapons against poverty, in contrast to a generally impoverished society where the central problem is to produce enough to go around. This country, Miss Wickenden said, could well afford to support at a decent level the aged, the disabled, dependent children, and others outside the work economy if there were the organizational and legal mechanisms to do so. Moreover, the fact that the affluent society is based on a high degree of organization, of course, makes the poor even more dependent on institutions and laws.

3. A maximum range of clearly defined rights and entitlements offers the strongest protection of the individual's security and freedom. Thus, the worker depends on his union contracts and labor laws; the businessman on incorporation, contracts, antimonopoly and other laws; the social security beneficiary has his entitlements spelled out in the law. The most difficult kind of entitlement to define sharply is that which is based on individual need, such as public assistance, Miss Wickenden said. She suggested that, in the long run, this difficulty can only be overcome by, first, reducing need by expanding measures such as social insurance and, second, expanding social services that serve all people regardless of economic status.

4. All individuals should have access to legal services and devices of appeal against legislation and bureaucratic decisions that threaten their rights. Miss Wickenden cited three basic areas in which public welfare clients need the help of lawyers: to secure equal access to the provisions of the laws; to right the inadequate or inequitable laws that help keep people in a disadvantaged position (for example, the many mothers who must rear children without the help of the fathers need greater protection from the law and legal help on problems related to support, separation, divorce, and custody); and to protect against discriminatory application of the law.

Lawyers, working with social workers, can help fill the enormous need of tenants in slum areas for legal assistance, according to Miss Nancy E. LeBlanc of the Legal Services Unit, Mobilization for Youth, New York City. "The lawyer can make it possible for them to exercise their legal rights--rights which are often so hedged in technicalities that even lawyers have problems," Miss LeBlanc said. "The uneducated, frequently non-English-speaking people, simply give up."

Because poor tenants have not been able to afford lawyers and landlords are satisfied with present laws, landlord-tenant law has virtually stood still, she said. Since tenants are rarely able to appeal cases, they are settled almost wholly in the lower courts, and thus no new precedents are established through appellate decisions. She went on to cite numerous illustrations of the need for advancement in the law and of the need for legal representation to bring about changes as well as to assure protection under present law.

David Caplovitz of the Bureau of Applied Social Research, Columbia University, discussed the consumer problems of the poor as revealed by a recent study he conducted in New York City. He found that of the 500 low-income families in this survey, more than 60 percent had consumer debts outstanding; one in every five families had experienced legal pressures because of missed payments. Only 27 percent had as much as $100 in savings.

With their low educational level and different cultural backgrounds, many of the families were easy victims of "bait advertising," high-pressure salesmen, and misrepresentation of products or terms of payments. Furthermore, when asked where they would go for help if they found themselves being cheated, 64 percent said they did not know. Among those who did know of sources of help, there were some who would rather pay what the merchant claimed rather than go to court and lose time from work.

Mr. Caplovitz said that, many times, the consumer fails to appear in court because he did not receive the summons:

"Instead of finding the defendant, the process server (who, in these cases is hired by the plaintiffs' lawyer) throws the summons away. Low-income families are especially likely to be victims of this practice since they are not apt to know how to protect their legal rights. Merchants are well aware that judgments by default are common and take advantage of this fact. However poor the merchant's case may be, he can count on winning a certain proportion simply because the consumer does not show up to defend himself."

NEW LEGAL SERVICES

Recently established legal service programs for low-income communities in New York City, Boston, and New Haven stress bringing legal services into the neighborhoods where the poor live; merging legal services with other social services to give a more comprehensive approach to problems of low-income families and individuals; and encouraging closer cooperation of social workers and social agencies with lawyers, law schools, and legal organizations.

The development, philosophy, and operation of the legal services unit of the Mobilization for Youth program in New York were outlined by Mr. Charles Grosser, Deputy Director of MFY. The legal unit concentrates on three major activities: provision of referral and preventive services; legal orientation of lay community leaders, professional staff, and clients; and use of the law as an instrument of social change.

The unit is staffed by four attorneys located at the MFY administrative office. Services are extended to the neighborhoods by some 400 staff members of MFY, including social workers, indigenous family aids, street-workers assigned to antisocial gangs, vocational counselors, community organizers, teachers, clergymen, etc. The numerous grievances of the poor are reviewed to sort out those amenable to legal intervention. Mr. Grosser stated that this means of providing legal services, although necessarily institutionalized, is nevertheless sufficiently congenial and accessible, and capable of providing an effective level of service where previously there was little or none.

William Wells, representing Action for Boston Community Development, described that organization's Unified Legal Services, which was launched in November 1964. This service extends legal assistance into Boston's three areas of lowest income through neighborhood law offices located in multiservice centers. At the multiservice centers, a referral system has been instituted among the attorneys, social workers, employment counselors, etc., to provide what Mr. Wells called a "total approach" to a family's problems. To make sure that the workers in the centers will know when to refer problems and to whom, they all receive inservice training.

Charles J. Parker, President of the Legal Assistance Association of New Haven, recounted the history of legal aid in New Haven and current plans for neighborhood lawyers. The plans include establishment of three general legal aid offices which will work with neighborhood social service teams of Community Progress, Inc., New Haven's community development organization. In addition to assisting the individuals and families of the neighborhood with their particular problems, the lawyers will investigate basic causes of social-legal problems of the neighborhood and educate the residents in regard to their basic legal rights.

"New and creative examination of the canons of professional ethics so far as they relate to legal aid activity" was called for by Washington attorney Zona Fairbanks Hostetler. She stated that the attitudes of the organized bar, which are expressed in these canons and which in effect determine matters of professional legal conduct, will be a strong factor in the future course of neighborhood legal services.

Mrs. Hostetler cited canon 35 as particularly in need of review. This canon states that a lawyer should not practice

law while in the employment of a lay agency because such employment may intervene between him and his client, control his services, or direct the performance of his duties. It also states that "charitable societies rendering aid to the indigent are not deemed such intermediaries." This raises the issue, Mrs. Hostetler said, of how indigency is to be interpreted. Often, legal aid offices have interpreted it to mean only "the absolutely destitute," she said.

She also noted that the canon, by excepting charitable organizations from its condemnation of lay intermediaries, seems to slight the possibility of conflicts and controls in nonprofit organizations. This possibility must be frankly faced and means devised to handle it.

Revision seems desirable also in the rules regarding solicitation of business, Mrs. Hostetler indicated. At present, she said, these rules tend to bridle efforts of legal service programs to educate the poor in regard to their rights and the services available.

In the discussion of the papers in this section, there was general support for experimentation with new forms of legal services for the poor. Some concern was expressed with regard to: lack of involvement of the poor in planning services; the new lawyer-client relationships being formed under the new programs and possible inroads into private practice; need for closer cooperation with other agencies and professional groups in the community, and criteria for evaluation of effectiveness.

FOREWARNING THE POOR OF LEGAL DIFFICULTIES

In introducing the papers on educational services, Dean C. Clyde Ferguson of Howard University Law School said it must be recognized that today economic deprivation is often simply the hallmark of a more profound deprivation--lack of education, loss of spirit and hope. Another factor to keep in mind in developing services, he said, is the perception of the poor of their own role in finding a way out of poverty--how do they see themselves and their relationship to the whole community?

That these are in fact important points was made clear from the account of the experience in community education in Harlem presented by James N. Finney, Director, Neighborhood Legal Services Project. Mr. Finney said that in addition to the general problem of apathy toward educational programs, in Harlem there is also a widespread frustration, impatience, suspicion, and cynicism regarding the effects of law. To help combat these resistant attitudes, the legal services project has tried to select topics of better-than-average interest as indicated from meetings with many community groups. Timing is also considered: the program on law of arrest was carried on in the summer, a time of particular unrest in Harlem; the experience of past winters showed that winter was the right time for the program on housing violations. In preparing pamphlets on the law of arrest, numerous small meetings were held in the community to test the clarity of the information. Large meetings were then held to discuss the subject and distribute the pamphlet.

Mr. Finney said that although it is too early to estimate the substantive effect of the educational project, he does have a partial answer:

> "Those who have responded to our efforts have not done so because we have convinced them, as yet, to have faith in the system. Rather, by working in the community day after day, we have convinced them of our sincere faith in the system. This is why we are certain that pamphlets alone would be inadequate. . ."

Great Britain's Citizens Advice Bureaus and legal advice and aid programs were described by Mrs. Mildred Zucker, Executive Director of the James Weldon Johnson Community Center in New York City, who recently made a study of British social work programs. The CAB's help citizens use public services effectively and generally provide advice on a wide range of problems,

including matters of housing, consumer credit, domestic relations, etc. Some of the bureaus provide free legal advice at sessions attended by panels of volunteer lawyers. Many citizens are referred to the legal aid and advice service administered by the Law Society for persons with limited means.

Mrs. Zucker reported that the CAB's and the Law Society recently studied the laws concerning citizens' rights with regard to government services and arrived at recommendations to enlarge the systems of appeal and public petition.

Some of the practices of the experimental educational program sponsored by Mobilization for Youth in New York's lower East Side, were summarized by Edward V. Sparer, the Director of the Legal Services Unit of MFY. Since pamphlets generally seem to be little heeded by the poor, the legal unit has devised an alternate method of providing youth with information they should have if they are ever arrested. Wallet-size cards are being distributed which state the rights in case of arrest, the phone number of the MFY lawyer whom the youth can call if he cannot afford his own, and the message to leave with the answering operator. This method makes information available at the moment of need.

A second practice the project follows is integration of legal services into community development programs. Mr. Sparer gave as an example the integration of a lawyer's services into a tenant council's organizing effort. In the lower East Side, hundreds of tenants were informed in this way of the legal right to rent-strike, he said. Because social workers are in regular contact with the most impoverished, considerable educational effort is focused on them rather than on the community directly.

Finally, Mr. Sparer advised: "Just being in the community--in an immediate neighborhood of the poor--working there and getting (at least occasionally) some results, is the single most important rule for a lawyer--or anyone else--who seeks to 'educate' the community."

The educational practices of legal aid offices were outlined by Junius Allison, Executive Director, National Legal Aid and Defenders Association. In a few places, legal aid lawyers participate in seminars initiated by social agencies for the benefit of caseworkers. Some legal aid offices draft statements on consumer credit matters, usually for use of potential clients. Legal aid offices have also prepared regular newspaper columns and, occasionally, radio and television programs on common legal problems.

THE LAWYER AND THE SOCIAL WORKER

All the speakers in the panel on "The Lawyer and the Social Worker" noted a lack of cooperation, understanding, and respect between the two professions.

Jacob T. Zukerman, attorney and Co-Chairman of the National Conference of Lawyers and Social Workers, said it was his impression that many lawyers have no knowledge of what a social worker does or how he is trained. In view of this fact, law schools should do much more to prepare lawyers so that they will recognize implications other than the legal ones and know when and where to refer a client for casework. He recommended that every community set up lawyer-social worker committees sponsored by the local bar associations, social work professional organizations, and social service agencies.

Speaking about the other side of the coin, William T. Downs, Executive Director and General Counsel, Catholic Charities of Michigan, declared that while social workers operate in the framework of law, many lack understanding of legal principles. For example, he said, social agencies sometimes slight the fact that adoption is a legal process that requires careful legal as well as social planning. In marriage and family counseling, social workers are sometimes not aware of the legal implications of their advice.

In the new era of "reaching-out" casework and action on causes as well as effects of social ills, legal understanding is more vital than ever before, Mr. Downs said. For one thing, since the law is a

conservative, sustaining force, it may be sustaining the very condition which the social worker is trying to change. Besides basic knowledge of the laws in his particular field, the social worker must also have an understanding of: the legal profession in terms of its professional self-concept; the modes of legal reasoning and analysis; and the adversary process and its basic theory of conflict. He advised that the worker must be prepared for challenge, especially the "activist" social worker who is trying to assure equal application of law in housing, consumer credit, and other problem areas. When such workers do have an understanding of law, they can be invaluable to the advancement of laws by providing new perspectives on their operation.

E. Donald Shapiro, Director of the Institute of Continuing Legal Education, University of Michigan Law School, declared that, in many instances, such as in domestic relations and juvenile court cases, the determinations of social workers frequently serve as a substitute for the adversary system and therefore social workers should be prepared to provide the protection of rights that is expected of adversary proceedings. Because important decisions affecting the freedom of individuals can depend on the social worker's factfinding and presentation, rules of evidence and other safeguards must be inherent in his work. Mr. Shapiro indicated that social work training should include material on the basic legal principles, characteristics of the psychology of the lawyer, how to communicate with him, and the legal system in general.

Louis L. Bennett, Regional Representative on Aging, Welfare Administration, Department of Health, Education, and Welfare, stated that social workers and lawyers need to be made aware, through their professional educational systems, of each other's basic philosophy and methods. He mentioned some of the matters in which cooperative action is needed: Review of the administrative actions of public agencies and the exercise of administrative discretion; new potentials in delivering legal services; financing of legal services; and planning of social action, including legislation.

THE LAW SCHOOLS

The potentials and limitations of law schools in extension of legal services to the poor were discussed at the final panel of the conference. The speakers outlined programs at Boston University, Georgetown University, and New York University in which students provide legal representation to indigent persons in criminal cases while gaining clinical experience.

Plans for the Boston University Roxbury Defender Project were described by Robert L. Spangenberg, Director, Legal Studies Institute, Boston University School of Law. Two attorneys on the staff of the Massachusetts defender's committee will be assigned to the court to represent indigent defendants in probable cause hearings, felonies, and certain serious misdemeanors. Selected third-year students, under the direct supervision of an attorney on the faculty, will handle all other cases involving misdemeanors. As part of the unified legal service in Boston, the project will give attention to other social problems of clients and provide for referrals to appropriate social agencies.

The Georgetown Intern Program, reviewed by Dean Kenneth Pye of the Georgetown Law Center, is in its fifth year. The program consists of an 11-month course for recent law school graduates leading to a master of laws degree. The interns serve at the District of Columbia Court of General Sessions, representing indigent persons charged with misdemeanors or felonies. During 1964, about 16 percent of the total felony defendants at the court were represented by interns. Cases are accepted only by specific assignment by a judge.

Dean Pye reported that the 30 graduates of this program have continued to show deep interest in the indigent and the person accused of crime. Five have become prosecutors, five have served as public defenders, several have undertaken indigency studies for their States,

and several have accepted positions in local bar associations in work dealing with indigency.

The value of internship programs is clear but their feasibility is limited, Dean Pye said. The limiting factors include:

1. An internship program is designed to serve the needs of the poor, with educational benefits restricted to the few students who participate; this gives the program low priority among most deans and faculties, whose primary obligations are teaching and research.

2. Most law schools are small and poor; less than one-third possess any type of graduate program. Thus, any new program faces the problem of financial support.

3. The director of such programs must have extensive practical experience in the areas in which the program operates, as well as intellectual prowess and research ability. Such persons are difficult to find and recruit, particularly for programs keyed to civil legal needs of the poor.

According to Professor Charles E. Ares, New York University School of Law, the law school curriculums continue to reflect the fact that "the highest rewards, professionally and materially, go to those who serve the clients able to pay the largest fees." One of the most difficult challenges, he indicated, is to stimulate student interest in legal problems of the poor and other areas largely ignored by the profession.

At New York University, a seminar is offered on legal problems of the poor, with guest lecturers from other university departments to give a more rounded look at poverty. The seminar has attracted students of high academic standing.

The curriculum can be further strengthened, Professor Ares feels, by including more course work built around statutory material, and "There seems no reason why such a course could not be based on housing codes or almost any of the various welfare statutes." Clinical experience, including work in agencies directly concerned with the problems of the poor, might well be a part of the third-year curriculum, he said.

Discussion following the presentations in this section brought out additional obstacles to student-lawyer programs: absence of teaching materials, lack of cooperation from courts, the constitutional question of whether a student lawyer can give adequate representation, and the problem of satisfactory job placement after graduation for the student who has been inspired to practice "poor man's law."

This conference thus served as a forum in which the many issues involved in providing legal services to the poor could be considered. In bringing lawyers and social workers together in a collaborative effort of national scope, it represented an important step forward.

Increased concern and awareness of the potentials for action in this area are apparent in the agenda of the 1965 National Conference on Social Welfare, to be held May 21-28 in Atlantic City. The theme of the conference is "Social Change Through Social Welfare and the Law." The subjects include civil rights; social change through judicial, legislative, and administrative processes; protection of liberties from encroachment through legislation; planning legal services; the abused child, etc.

These wide-ranging discussions as well as the experimental programs being carried out in cities and universities indicate a new determination to find means of ensuring the rights of all citizens, regardless of socioeconomic standing.

Juvenile Court Cases in 1963

A record 601,000 juvenile delinquency cases (excluding traffic offenses) were handled by the juvenile courts in the United States in 1963, according to "Juvenile Court Statistics--1963," a report recently released by the Children's Bureau. An estimated 518,000 children, or 1.9 percent of all children 10-17 years of age, were involved in these cases (some were referred more than once during the year).

The number of delinquency cases was 8 percent greater in 1963 than in 1962, while the child population aged 10-17 increased only 4 percent. The 1963 rise in juvenile court cases continues an upward trend which began in 1949. Delinquency cases surged upward during World War II, fell off sharply in the immediate postwar years, and then began to climb again in 1949, rising steadily each year except for 1961.

The Children's Bureau report gives this explanation for the current upswing: "Juveniles born in the late 1940's when birth rates were high are now swelling the ranks of the 16-year-olds. This is a peak age for juvenile delinquency. It coincides with the critical time when compulsory school attendance ends in many States, when many young persons are making the difficult transition from school to work, and when all young persons experience the pressures of trying to bridge the gap between childhood and adulthood status."

Urban courts handled 8 percent more cases in 1963 compared with 1962; semi-urban courts, 10 percent more; and rural court cases went up 4 percent; this reverses the predominant pattern of recent years in which cases increased faster in rural areas than elsewhere. The rate of delinquency cases (cases per 1,000 child population) was about three times higher in predominantly urban areas than in mostly rural areas. Courts in urban areas handled more than two-thirds of all delinquency cases.

Delinquency cases continued to occur primarily among boys--they were referred to court more than four times as often as girls. The percentage increase in cases over 1962 was higher for girls, however--11 percent compared with 8 percent for boys.

On the basis of reports submitted by courts serving large cities, 43.4 percent of the offenses for which juveniles were referred to court were committed against property. Offenses against a person constituted 9.8 percent of the total. Other major categories of offenses were: offenses against public order and decency, 10.1 percent; serious motor vehicle violations, 3.5 percent; and offenses applicable to juveniles only (running away, ungovernable, truancy, curfew violation, etc.), 26.8 percent. Boys were referred to court primarily for (in order of frequency) larceny, burglary, and auto theft. Girls were most frequently referred for running away, being ungovernable, larceny, and sex offenses.

About one-third of the delinquency cases referred to courts serving large cities were dismissed with a warning or an adjustment. This does not mean that a high proportion of the children were innocent of delinquent acts. (The complaints were not substantiated in only 11 percent of cases.) Rather, stability of the child's family and his potential for receiving proper parental supervision seemed to be the most common basis for dismissals.

In 1963, about half the delinquency cases were handled "Nonjudicially" (without a petition) and half were handled "judicially" (with petition). In almost half of the cases handled judicially, the child was placed on probation; in almost one-fifth, the child was committed to care and custody of an agency or institution. Almost half the cases handled nonjudicially were adjusted, indicating that perhaps in these cases the offenses tended to be relatively minor or the child was without a history of serious delinquency.

Juvenile courts also disposed of about 366,000 traffic cases in 1963, a 17 percent increase over 1962. These cases involved about 315,500 different children, or 1.1 percent of the child population.

Publications of Interest*

WELFARE ADMINISTRATION

YOU, THE LAW, AND RETIREMENT. By Virginia Lehmann. Office of Aging, 1965. OA No. 800. 36 pp. 25 cents. Why, how, and when people should consult a lawyer about decisions they must make in preparing for retirement and after retirement.

NEW APPROACHES: PREVENTION AND CONTROL OF JUVENILE DELINQUENCY. Office of Juvenile Delinquency and Youth Development, 1965. 17 pp. Describes the programs administered by the Office in cooperation with the President's Committee on Juvenile Delinquency and Youth Crime.

SUMMARY OF THE JOINT CONFERENCE ON RELATIONSHIPS OF PLANNING COUNCILS AND PUBLIC WELFARE AGENCIES. Welfare Administration, 1965. 37 pp. Conference sponsored by the American Public Welfare Association, National Social Welfare Assembly, United Community Funds and Councils of America, and the Welfare Administration.

DIVISION OF TECHNICAL TRAINING AUDIO-VISUAL AID CATALOGUE. Bureau of Family Services, March 1965. 16 pp. List of films, filmstrips, and recordings available for loan, free of charge, from the Division.

A STUDY OF SPECIALIZED NURSING POSITIONS AND PERSONNEL IN OFFICIAL STATE AND LOCAL MATERNAL AND CHILD HEALTH AND CRIPPLED CHILDREN'S PROGRAMS, 1962. Analysis by Margaret W. Thomas. Children's Bureau, 1965. 25 pp.

VISION SCREENING OF THE PRESCHOOL CHILD: REPORT OF A STUDY. By Robert A. Savitz, Robert B. Reed, and Isabelle Valadian. Children's Bureau Publication 414. 1964. 70 pp. 45 cents. A descriptive study to provide those in the field of vision screening with the latest information on testing very young children.

OPEN HEART SURGERY IN CHILDREN: A STUDY IN NURSING CARE. By Florence G. Blake. Children's Bureau Publication 418. 1964. 102 pp. 35 cents. Describes in detail the nursing care of a 4-year-old girl before and after open heart surgery.

YOUR CHILD FROM ONE TO THREE. Children's Bureau Publication 413. 1964. 20 pp. 20 cents.

NEW PUBLICATIONS ON AGING

ACTION FOR OLDER AMERICANS: 1964 Annual Report of the President's Council on Aging. President's Council on Aging, 1965. 71 pp. 30 cents. Reviews Federal executive and legislative activities on behalf of older persons.

THE FAMILY IS ALL GENERATIONS. Family Service Association of America, New York, 1965. 46 pp. 45 cents. The emerging ways of helping older people and their families cope with common problems.

SERVING THE AGING: AN EXPERIMENT IN SOCIAL WORK AND PUBLIC HEALTH NURSING. By Margaret Blenkner and others. Community Service Society of New York, New York, 1964. 249 pp. $2.50.

DOUBLE JEOPARDY: THE OLDER NEGRO IN AMERICA TODAY. National Urban League, New York, 1964. 28 pp. Outlines the plight of the more than 1 million older Negroes in America and offers suggestions for community action programs.

AGE WITH A FUTURE: Proceedings of the Sixth International Congress of Gerontology, 1963, Copenhagen. Edited by P. From Hansen. G. A. Davis, Philadelphia, 1964. 662 pp. $6.

DEVELOPMENTS IN AGING, 1963 and 1964. U.S. Senate, Special Committee on Aging (89th Congress, 1st session, Senate report no. 124), 1965. 86 pp. 25 cents.

FRAUDS AND DECEPTIONS AFFECTING THE ELDERLY: INVESTIGATIONS, FINDINGS, RECOMMENDATIONS, 1964. U.S. Senate, Special Committee on Aging (89th Congress, 1st session, committee print), 1965. 90 pp. 30 cents.

AGING PROCESS OF POPULATION. By Edward Rosset. Macmillan, New York, 1964. 478 pp. $12. Historical analysis of the aging of the world population. Translated from the Polish.

GUIDES FOR CATHOLIC HOMES FOR THE AGING. National Conference of Catholic Charities, Washington, 1964. 109 pp. $1.50. Defines purposes and guiding policies, suggests steps in planning, and describes services and duties of staff members.

RETIREMENT FACILITIES REGISTER. Edited by George Stromme. Active Retirement Executives Association, Los Angeles, 1964. 224 pp. $12.

*U.S. Government publications for which prices are listed may be ordered from the Superintendent of Documents, U.S. Government Printing Office, Washington, D.C. 20402 (25 percent discount on lots of 100 or more). Inquiries or orders for other publications should be directed to the publisher or issuing agency.

Program and Operating Statistics

PUBLIC ASSISTANCE IN FEBRUARY 1965

Persons receiving aid under the six public assistance programs[1] in February numbered about 8.2 million--roughly 43,000 more than in January. The increase centered in aid to families with dependent children in which the number of recipients rose 52,000 (1.2 percent). Nearly half of the latter increase occurred in the unemployed-parent segment of the program in the 18 States making payments in behalf of children of unemployed parents. Payments under medical assistance for the aged were made in behalf of 230,000 persons--500 more than in January.

The decline of 4,000 recipients (0.6 percent) in the State and/or locally financed programs of general assistance was the first in 4 months and resulted largely from the decrease of 5,000 in Ohio. That State's decrease under general assistance, however, was offset by an increase under the unemployed-parent segment of its program for aid to families with dependent children. For aid to the permanently and totally disabled the national decrease of 300 recipients was attributable to the decline in Colorado, which discontinued money payments from aid to the permanently and totally disabled funds to about 4,000 recipients of medical assistance for the aged in nursing homes.

The downward movement in number of recipients of old-age assistance and aid to the blind continued in February, with decreases of 4,300 and 300, respectively.

Total expenditures for assistance, including vendor payments for medical care, rose $4.3 million in February to $446.5 million. The rise reflected mainly the increases in money payments in aid to families with dependent children ($2.7 million) and in vendor payments for medical care in old-age assistance ($1.3 million).

Nationally, the average money payment rose 68 cents in aid to the permanently and totally disabled and changed by a smaller amount in each of the other programs providing money payments. Aid to the blind was the only program to show a decrease.

State action to adjust payments or to initiate other changes was limited in February. In North Dakota, an allowance for real estate taxes was included in payments for February in old-age assistance, aid to the blind, aid to the permanently and totally disabled, and aid to families with dependent children. Oregon and Rhode Island assisted school children 18 to 21 years of age for the first time under their programs of aid to families with dependent children. Federal participation in payments for such children became available in October 1964.

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[1] Data for specified types of assistance under State programs for aid to the aged, blind, or disabled or for such aid and medical assistance for the aged are classified with data for separate State programs for old-age assistance, aid to the blind, aid to the permanently and totally disabled, or medical assistance for the aged.

Table 1. Number of recipients of public assistance in the United States, by month, February 1964-February 1965 1/

[Except for general assistance, includes cases receiving only vendor payments for medical care]

Year and month	Old-age assistance 2/	Medical assistance for the aged 2/	Aid to the blind 2/	Aid to the permanently and totally disabled 2/	Aid to families with dependent children			General assistance 4/	
					Families	Total recipients 3/	Children	Cases	Recipients
	Number of recipients								
1964									
February	2,188,506	160,471	97,617	486,286	999,483	4,141,730	3,098,336	374,000	932,000
March	2,188,610	172,736	97,760	490,156	1,013,313	4,206,817	3,148,698	373,000	913,000
April	2,186,709	176,311	97,631	493,971	1,023,498	4,261,965	3,188,173	360,000	845,000
May	2,184,945	180,956	97,574	497,402	1,021,623	4,253,536	3,183,929	335,000	746,000
June	2,182,037	187,021	97,408	501,426	1,014,109	4,214,809	3,159,402	326,000	708,000
July	2,177,074	185,537	97,259	508,895	1,009,194	4,191,200	3,142,795	321,000	700,000
August	2,167,588	207,386	97,066	511,595	1,005,821	4,175,979	3,132,370	323,000	712,000
September	2,162,386	208,358	96,853	514,938	1,003,466	4,164,828	3,126,988	321,000	702,000
October	2,160,922	220,783	96,586	519,070	1,005,880	4,174,728	3,138,039	319,000	691,000
November	2,161,446	217,336	96,416	521,789	1,010,016	4,195,113	3,152,468	322,000	702,000
December	2,158,994	226,728	96,438	527,503	1,029,936	4,289,028	3,218,301	346,000	778,000
1965									
January	2,154,581	229,833	96,155	534,607	1,046,960	4,371,872	3,274,801	352,000	806,000
February	2,150,283	230,342	95,834	534,282	1,056,156	4,423,988	3,311,689	353,000	802,000
	Percentage change from previous month								
1964									
February	-0.1	+2.3	-0.1	+0.8	+1.7	+2.0	+1.8	-0.6	-2.0
March	(5/)	+7.6	+.1	+.8	+1.4	+1.6	+1.6	(6/)	-2.1
April	-.1	+2.1	-.1	+.8	+1.0	+1.3	+1.3	-3.6	-7.5
May	-.1	+2.6	-.1	+.7	-.2	-.2	-.1	-6.9	-11.6
June	-.1	+3.4	-.2	+.8	-.7	-.9	-.8	-2.9	-5.1
July	-.2	-.8	-.2	+1.5	-.5	-.6	-.5	-1.5	-1.2
August	-.4	+11.8	-.2	+.5	-.3	-.4	-.3	+.8	+1.8
September	-.2	+.5	-.2	+.7	-.2	-.3	-.2	-.6	-1.4
October	-.1	+6.0	-.3	+.8	+.2	+.2	+.4	-.8	-1.6
November	(5/)	-1.6	-.2	+.5	+.4	+.5	+.5	+1.1	+1.6
December	-.1	+4.3	(5/)	+1.1	+2.0	+2.2	+2.1	+7.3	+10.9
1965									
January	-.2	+1.4	-.3	+1.3	+1.7	+1.9	+1.8	+1.8	+3.6
February	-.2	+.2	-.3	-.1	+.9	+1.2	+1.1	+.3	-.6

1/ All data subject to revision. 2/ Represents data for recipients of the specified type of assistance under separate State programs and under State programs for aid to the aged, blind, or disabled or for such aid and medical assistance for the aged. 3/ Includes as recipients the children and 1 or both parents or 1 caretaker relative other than a parent in families in which the requirements of such adults were considered in determining the amount of assistance. 4/ Partly estimated. Excludes Idaho, Indiana, and Nebraska; data not available. 5/ Increase of less than 0.05 percent. 6/ Decrease of less than 0.05 percent.

Table 2. Amount of public assistance payments in the United States, by month, February 1964-February 1965 1/

[Except for general assistance, includes vendor payments for medical care]

Year and month	Total 2/	Old-age assistance 3/	Medical assistance for the aged 3/	Aid to the blind 3/	Aid to the permanently and totally disabled 3/	Aid to families with dependent children	General assistance 4/
	Amount of assistance						
1964							
February	$414,627,000	$171,345,730	$31,757,790	$8,076,895	$37,336,550	$132,718,951	$24,950,000
March	424,742,000	172,520,773	34,679,610	8,140,935	38,241,308	136,836,208	25,144,000
April	427,751,000	171,442,862	36,533,311	8,167,521	38,683,080	139,563,179	24,063,000
May	422,752,000	171,194,291	35,220,765	8,200,759	38,975,829	138,443,298	21,838,000
June	422,681,000	171,135,263	36,835,583	8,188,807	39,365,811	137,028,262	21,063,000
July	423,372,000	171,666,857	36,263,042	8,218,116	40,135,368	137,360,488	21,082,000
August	422,204,000	168,196,378	39,228,163	8,198,173	39,874,356	136,270,529	20,926,000
September	423,629,000	168,527,705	38,263,807	8,179,619	40,478,606	137,613,993	21,238,000
October	434,067,000	170,460,876	43,739,320	8,237,442	41,283,107	139,484,356	21,674,000
November	428,290,000	168,957,670	39,963,969	8,194,037	41,292,179	139,295,652	21,319,000
December	444,769,000	170,334,474	44,140,554	8,274,220	42,522,111	145,179,376	23,718,000
1965							
January	442,173,000	169,148,818	43,844,631	8,275,344	42,486,101	145,746,099	23,191,000
February	446,458,000	170,186,062	42,507,140	8,267,841	43,300,119	148,888,057	23,426,000
	Percentage change from previous month						
1964							
February	+1.8	+1.4	+2.7	+0.8	+2.0	+2.9	-2.8
March	+2.4	+.7	+9.2	+.8	+2.4	+3.1	+.8
April	+.7	-.6	+5.3	+.3	+1.2	+2.0	-4.3
May	-1.2	-.1	-3.6	+.4	+.8	-.8	-9.2
June	(5/)	(5/)	+4.6	-.1	+1.0	-1.0	-3.6
July	+.2	+.3	-1.6	+.4	+2.0	+.2	+.1
August	-.3	-2.0	+8.2	-.2	-.7	-.8	-.7
September	+.3	+.2	-2.5	-.2	+1.5	+1.0	+1.5
October	+2.5	+1.1	+14.3	+.7	+2.0	+1.4	+2.1
November	-1.3	-.9	-8.6	-.5	(6/)	-.1	-1.6
December	+3.8	+.8	+10.5	+1.0	+3.0	+4.2	+11.3
1965							
January	-.6	-.7	-.7	(6/)	-.1	+.4	-2.2
February	+1.0	+.6	-3.1	-.1	+1.9	+2.2	+1.0

1/ All data subject to revision. 2/ Total exceeds sum of columns because of inclusion of vendor payments for medical care from general assistance funds and from special medical funds; data for such expenditures partly estimated for some States. 3/ Represents data for payments to recipients of the specified type of assistance under separate State programs and under State programs for aid to the aged, blind, or disabled or for such aid and medical assistance for the aged. 4/ Partly estimated. Excludes Idaho, Indiana, and Nebraska; data not available. 5/ Decrease of less than 0.05 percent. 6/ Increase of less than 0.05 percent.

Table 3. Old-age assistance: Recipients and payments to recipients, by State, February 1965 1/

[Includes vendor payments for medical care and cases receiving only such payments]

State	Number of recipients	Payments to recipients		Percentage change from--			
		Total amount	Average	January 1965 in--		February 1964 in--	
				Number	Amount	Number	Amount
Total 2/.....	2,150,283	$170,186,062	$79.15	-0.2	+0.6	-1.7	-0.7
Ala.....	111,508	7,567,005	67.86	+.2	-1.3	+2.4	+1.4
Alaska 3/ 4/...	1,368	5/ 125,703	91.89	-.4	+20.4	-1.4	+1.8
Ariz.....	13,189	835,160	63.32	-.4	(6/)	-1.2	+.2
Ark.....	58,913	3,671,829	62.33	+.1	-2.5	+2.1	+3.1
Calif.....	272,493	30,354,973	111.40	-.3	+1.6	+1.0	+2.1
Colo. 2/.....	43,680	4,193,702	96.01	-.4	+.8	-1.7	-14.4
Conn.....	6,980	563,510	80.73	-2.3	-5.4	-12.7	-14.1
Del.....	1,407	107,403	76.33	-.5	+18.6	+17.0	+32.2
Dist. of Col....	2,348	206,459	87.93	-2.0	+4.2	-3.7	-.8
Fla. 3/.....	73,346	4,864,326	66.32	+.1	-1.2	+2.8	+2.6
Ga.....	92,015	5,254,784	57.11	(6/)	+1.7	+.1	+2.8
Guam 7/.....	148	4,711	31.83	---	---	---	---
Hawaii 3/.....	1,183	87,064	73.60	+1.2	-6.4	+3.6	+15.7
Idaho.....	4,392	323,016	73.55	-.5	-1.7	-9.5	-8.7
Ill. 3/.....	56,158	5,259,521	93.66	-.7	-.6	-6.1	+.1
Ind.....	22,730	1,894,952	83.37	-.4	-.5	-2.3	+0.2
Iowa.....	27,434	2,565,246	93.51	-.6	+1.2	-6.2	-3.9
Kans. 3/.....	21,849	1,990,426	91.10	(6/)	-2.7	-5.6	-2.7
Ky. 3/.....	58,565	3,790,398	64.72	+.9	+9.3	+3.9	+9.5
La.....	130,817	11,127,931	85.06	+.1	+.1	+.8	+1.4
Maine 3/.....	10,941	903,322	82.56	-.6	-.7	-2.1	-3.4
Md. 3/.....	9,897	726,348	73.39	(8/)	(6/)	+5.0	+7.0
Mass.....	52,480	4,705,961	89.67	-1.7	+2.6	-5.0	-7.3
Mich.....	49,092	4,802,596	97.83	(6/)	+7.6	-2.2	+10.5
Minn.....	32,163	2,693,230	83.74	-.9	-1.3	-25.5	-44.9
Miss.....	73,072	2,869,950	39.28	+.1	+.5	-2.3	-1.4
Mo.....	102,035	6,815,952	66.80	-.2	-1.7	-2.1	-2.6
Mont.....	5,243	377,401	71.98	-.7	-.8	-6.7	-6.7
Nebr.....	12,506	1,160,236	92.77	+.2	+.9	-2.2	+1.5
Nev.....	2,625	235,314	89.64	-.4	-.3	+2.9	+4.1
N. H.....	4,396	447,584	101.82	-.2	-.3	-3.1	-2.3
N. J.....	13,832	1,200,108	86.76	-.1	+.3	-1.1	+6.9
N. Mex. 3/.....	10,340	825,968	79.88	-.4	-.5	-4.0	+2.8
N. Y. 3/.....	55,957	5,140,084	91.86	-1.0	-2.2	-.5	+.1
N. C.....	42,647	2,566,386	60.18	-.4	-.5	-2.3	+1.5
N. Dak. 3/.....	5,160	534,964	103.68	-.7	+15.4	-6.4	-6.4
Ohio.....	82,398	7,134,981	86.59	-.5	-.4	-3.1	-2.9
Okla. 3/.....	82,735	7,975,199	96.39	-.2	(8/)	-1.0	+1.7
Oreg.....	10,285	735,899	71.55	-.5	-.9	-11.5	-6.3
Pa.....	46,014	3,631,770	78.93	-.6	-2.9	-2.2	+3.6
P. R. 3/.....	30,642	291,384	9.51	-.7	+1.0	-6.8	-3.0
R. I. 3/.....	5,890	558,536	94.83	-.5	-.4	-1.5	+9.9
S. C.....	25,532	1,331,743	52.16	-.3	-1.8	-3.8	+.4
S. Dak.....	7,108	604,058	84.98	-.5	-.6	-3.9	-.8
Tenn.....	44,773	2,574,798	57.51	-.3	+2.1	-3.5	+1.0
Tex.....	230,299	16,149,798	70.13	+.1	+.1	+.7	+.9
Utah.....	4,826	331,053	68.60	-.6	-.9	-7.3	-9.8
Vt. 3/.....	5,408	457,877	84.67	-.2	-1.4	-1.2	-3.7
V. I.....	444	18,182	40.95	-1.6	-1.2	-5.9	+3.6
Va.....	13,222	848,851	64.20	-.6	-.1	-1.5	+2.2
Wash.....	32,669	2,628,817	80.47	+.1	+5.2	-4.9	+2.7
W. Va.....	14,102	703,952	49.92	-.3	-.2	-5.7	-3.9
Wis.....	28,581	3,194,389	111.77	+.7	+4.5	-4.0	+3.4
Wyo.....	2,446	221,252	90.45	-.5	+3.8	-4.9	+1.2

1/ All data subject to revision. 2/ Includes 3,874 recipients aged 60-64 in Colorado and payments of $337,485 to these recipients. Such payments were made without Federal participation. 3/ Represents aid to the aged under program for aid to the aged, blind, or disabled, or for such aid and medical assistance for the aged. 4/ Partly estimated. 5/ In addition, supplemental payments from general assistance funds were made to recipients. 6/ Increase of less than 0.05 percent. 7/ Data for September; later data not available. 8/ Decrease of less than 0.05 percent.

Table 4. Medical assistance for the aged: Recipients and payments for recipients, by State, February 1965 1/

State	Number of recipients 2/	Payments for recipients		Percentage change from January 1965	
		Total amount	Average	Number	Amount
Total.....	230,342	$42,507,140	$184.54	+0.2	-3.1
Ala.....	245	70,803	288.99	-9.6	-7.3
Ark.....	2,939	161,397	54.92	+3.9	-1.6
Calif.....	28,461	8,234,491	289.33	+2.0	-2.9
Colo. 3/.....	4,450	4/ 830,000	---	---	---
Conn.....	6,477	4/ 1,278,727	197.43	-1.7	-3.4
Del.....	69	21,152	306.55	(5/)	(5/)
Dist. of Col.....	393	123,361	313.90	-50.9	-69.4
Fla. 6/.....	688	238,367	346.46	+14.3	+11.5
Guam 7/.....	27	368	(5/)	---	---
Hawaii 6/.....	702	164,596	234.47	+5.4	-8.7
Idaho.....	2,173	332,419	152.98	-3.2	+2.0
Ill. 6/.....	1,396	599,907	429.73	+28.5	+88.1
Ind. 8/.....	(8/)	(8/)	(8/)	(8/)	(8/)
Iowa.....	7,800	570,868	73.19	+2.6	-1.0
Kans. 6/.....	2,705	4/ 396,853	146.71	-.1	+.8
Ky. 6/.....	10,142	403,199	39.76	+22.4	+56.5
La.....	533	92,890	174.28	+16.9	+2.1
Maine 6/.....	364	88,697	243.67	-2.7	-16.9
Md. 6/ 9/.....	11,000	381,560	34.69	---	---
Mass.....	28,165	4/ 4,758,476	168.95	-3.2	+1.6
Mich.....	5,791	2,367,513	408.83	-.2	+12.5
Minn.....	12,944	4/ 2,585,588	199.75	+2.7	+2.7
Nebr.....	291	97,331	334.47	+37.3	+22.2
N. H.....	1,433	73,122	51.03	-19.5	-24.6
N. J.....	5,315	4/ 1,299,536	244.50	+.4	+2.8
N. Y. 6/.....	33,188	4/ 9,652,997	290.86	-6.7	-13.7
N. C.....	604	184,105	304.81	-14.8	-14.0
N. Dak. 6/.....	10/ 1,307	4/ 285,712	218.60	+4.7	+7.4
Okla. 6/.....	1,047	163,207	155.88	-11.2	-18.0
Oreg.....	4,059	616,519	151.89	+1.9	+6.7
Pa.....	10,178	2,482,470	243.91	-9.9	-17.9
P. R. 6/.....	3,104	97,958	31.56	-21.3	-12.3
R. I. 6/.....	1,096	224,977	205.27	+106.8	+2957.6
S. C.....	946	182,584	193.01	-12.0	-6.1
S. Dak.....	545	27,160	49.83	+5.0	+2.1
Tenn.....	8,361	296,400	35.45	+1.8	+13.4
Utah.....	2,264	253,954	112.17	+1.6	+1.4
Vt. 6/.....	125	44,227	353.82	-6.0	+61.9
V. I.....	136	1,206	8.87	+36.0	-68.7
Va.....	2,560	204,018	79.69	-.4	-3.2
Wash.....	9,898	1,491,849	150.72	+5.7	+9.5
W. Va.....	11,430	334,031	29.22	+14.2	+15.0
Wis.....	4,958	776,151	156.55	+10.4	+1.2
Wyo.....	33	16,394	(5/)	(5/)	(5/)

1/ All data subject to revision. 2/ Persons for whom vendor payments were made during the report month. 3/ Estimated. 4/ Includes money payments not subject to Federal participation as follows: an unknown amount in Colorado, $66 in Connecticut, $11,107 in Kansas, $97,877 in Massachusetts, $35,542 in Minnesota, $8,041 in New Jersey, $47,527 in New York, and $2,835 in North Dakota. 5/ Average payment not computed on base of fewer than 50 recipients; percentage change on fewer than 100 recipients. 6/ Represents medical assistance for the aged under program for aid to the aged, blind, or disabled and medical assistance for the aged. 7/ Data for September; later data not available. 8/ Program in operation but no payments made in February. 9/ Data for January; February data not received. 10/ Includes an unknown number of cases receiving only money payments.

Table 5. Aid to the blind: Recipients and payments to recipients, by State, February 1965 1/

/Includes vendor payments for medical care and cases receiving only such payments/

State	Number of recipients	Payments to recipients		Percentage change from--			
		Total amount	Average	January 1965 in--		February 1964 in--	
				Number	Amount	Number	Amount
Total 2/.....	95,834	$8,267,841	$86.27	-0.3	-0.1	-1.8	+2.4
Ala.....	1,823	125,554	68.87	-.3	+.3	+5.2	+33.1
Alaska 3/ 4/...	110	9,021	82.01	0	0	+5.8	+11.7
Ariz.....	819	58,311	71.20	-.5	-.8	-1.6	-2.9
Ark.....	1,929	135,329	70.16	-.4	-1.6	-2.0	+1.5
Calif. 2/.....	12,374	1,732,570	140.02	-.4	-.8	+.5	+8.8
Colo.....	251	21,523	85.75	-1.6	+1.8	-3.1	-4.5
Conn.....	309	37,835	122.44	-1.6	+3.9	-2.2	+11.7
Del.....	297	26,079	87.81	-.7	+.6	+1.7	+10.0
Dist. of Col...	203	16,044	79.03	+.5	+5.3	+6.3	+15.0
Fla. 3/.....	2,592	179,048	69.08	+.3	+.9	+1.3	+5.0
Ga.....	3,196	190,950	59.75	-.2	+1.2	+1.3	+4.5
Guam 5/.....	7	132	(6/)	---	---	---	---
Hawaii 3/.....	76	7,705	101.38	(6/)	(6/)	(6/)	(6/)
Idaho.....	137	10,336	75.45	+3.8	+4.5	+6.2	+11.3
Ill. 3/.....	2,459	231,789	94.26	-.4	-1.4	-6.8	-1.3
Ind.....	1,776	148,388	83.55	-.3	-7.6	-.3	+5.5
Iowa.....	1,150	117,038	101.77	-.1	+1.7	-6.4	-5.2
Kans. 3/.....	515	48,423	94.03	0	-11.6	0	+9.0
Ky. 3/.....	2,489	181,325	72.85	+.6	+5.1	+2.4	+5.3
La.....	2,775	225,786	81.36	-.5	+.4	-1.8	-1.2
Maine 3/.....	307	25,359	82.60	-.6	-1.0	-17.0	-18.9
Md. 3/.....	387	31,479	81.34	+1.6	+1.9	-5.6	-2.2
Mass.....	2,280	303,814	133.25	-1.4	-5.4	(7/)	+.7
Mich.....	1,674	160,396	95.82	-.5	+10.9	-1.1	+2.8
Minn.....	1,045	115,683	110.70	-.3	+.3	-3.0	-2.0
Miss.....	2,637	117,220	44.45	-.9	-1.9	-12.0	-9.5
Mo. 2/.....	4,417	331,275	75.00	-.6	-.6	-3.6	-3.6
Mont.....	250	21,659	86.64	+.4	+1.3	-4.2	-1.5
Nebr.....	626	68,698	109.74	-1.3	-.7	-7.5	-1.7
Nev.....	156	17,850	114.42	-.6	+.4	-8.2	-11.6
N. H.....	267	28,242	105.78	+.8	-1.6	+.8	+3.1
N. J.....	931	82,255	88.35	-.7	+1.0	-.6	+5.2
N. Mex. 3/.....	345	33,135	96.04	+.3	+.4	+.3	+7.3
N. Y. 3/.....	3,095	344,960	111.46	-1.0	+2.0	-3.2	(7/)
N. C.....	4,975	346,090	69.57	-.4	-.9	-1.9	+3.8
N. Dak. 3/.....	75	7,082	94.43	(6/)	(6/)	(6/)	(6/)
Ohio.....	3,274	275,262	84.08	+.2	+6.2	-4.0	-3.1
Okla. 3/.....	1,640	200,248	122.10	-.5	-.7	-3.4	-1.2
Oreg.....	453	41,371	91.33	+1.8	+1.8	+13.8	+25.5
Pa. 2/.....	17,637	1,337,666	75.84	-.4	-.4	-1.3	-.2
P. R. 3/.....	1,398	11,855	8.48	+.3	+.6	-9.3	-7.8
R. I. 3/.....	101	9,383	92.90	-2.9	-4.4	(6/)	(6/)
S. C.....	1,846	115,264	62.44	+.6	+1.4	+6.3	+7.0
S. Dak.....	116	8,070	69.57	-.9	-1.6	-10.1	-9.3
Tenn.....	2,120	118,380	55.84	-.6	+.5	-7.8	(7/)
Tex.....	4,741	329,791	69.56	-.3	-.3	-2.1	-1.8
Utah.....	168	12,090	71.96	-1.8	-7.2	-4.5	-8.6
Vt. 3/.....	120	8,832	73.60	0	-2.3	+9.1	+9.5
V. I.....	15	602	(6/)	(6/)	(6/)	(6/)	(6/)
Va.....	1,136	80,166	70.57	+.2	-1.3	-1.2	+3.6
Wash.....	669	58,483	87.42	+.9	+2.5	+.1	+4.1
W. Va.....	793	38,029	47.96	0	+.2	-5.6	-5.5
Wis.....	795	78,467	98.70	-.5	+.8	-2.9	-.8
Wyo.....	58	5,493	94.71	(6/)	(6/)	(6/)	(6/)

1/ All data subject to revision. 2/ Data include recipients of payments made without Federal participation and payments to these recipients as follows: California, $24,992 to 149 recipients; Missouri, $54,985 to 708 recipients; and Pennsylvania, $953,254 to 12,827 recipients. 3/ Represents aid to the blind under program for aid to the aged, blind, or disabled or for such aid and medical assistance for the aged. 4/Partly estimated. 5/ Data for September; later data not available. 6/ Average payment not computed on base of fewer than 50 recipients; percentage change on fewer than 100 recipients. 7/ Increase of less than 0.05 percent.

Table 6. Aid to the permanently and totally disabled: Recipients and payments to recipients, by State, February 1965 1/

[Includes vendor payments for medical care and cases receiving only such payments]

State	Number of recipients	Payments to recipients		Percentage change from--			
		Total amount	Average	January 1965 in--		February 1964	
				Number	Amount	Number	Amount
Total.....	534,282	$43,300,119	$81.04	-0.1	+1.9	+9.9	+16.0
Ala.....	14,813	694,224	46.87	-.2	+1.0	+5.1	+6.2
Alaska 2/ 3/....	204	22,740	111.47	0	+2.2	+1.9	+74.4
Ariz.....	3,407	229,407	67.33	+.8	+.6	+30.4	+30.1
Ark.....	9,504	562,700	59.21	+.2	-3.8	+4.6	+7.8
Calif.....	64,334	7,366,872	114.51	+3.5	+4.5	+45.8	+56.0
Colo.....	6,041	459,954	76.14	-41.1	-8.7	+.8	+2.9
Conn.....	7,956	653,872	82.19	+1.4	+8.7	+14.1	+31.2
Del.....	440	33,400	75.91	-1.1	-.4	+1.9	+7.3
Dist. of Col....	3,232	267,038	82.62	+.7	+.8	+7.4	+15.2
Fla. 3/.....	17,357	1,219,445	70.26	+.5	-2.3	+11.4	+9.2
Ga.....	26,976	1,633,670	60.56	+.2	+2.7	+5.4	+9.0
Guam 4/.....	50	1,259	25.18	---	---	---	---
Hawaii 3/.....	1,151	151,553	131.67	+5.0	+4.5	+9.9	+23.2
Idaho.....	3,036	172,259	56.74	+1.0	+1.4	+14.0	+19.6
Ill. 3/.....	29,192	2,817,215	96.51	+.5	+.3	+5.3	+10.0
Ind.....	1,454	188,299	129.50	+3.3	+2.7	+63.0	+109.0
Iowa.....	1,251	102,242	81.73	+1.3	+1.1	+15.4	+13.6
Kans. 3/.....	5,005	568,874	113.66	+.9	+.6	+11.9	+18.4
Ky. 3/.....	10,847	843,325	77.75	+2.0	+8.6	+12.7	+18.8
La.....	19,511	1,144,457	58.66	+.5	+1.3	+5.0	+6.6
Maine 3/.....	2,267	202,240	89.21	+.3	+.6	+1.3	+3.0
Md. 3/.....	7,737	617,427	79.80	+.4	+.7	+9.0	+12.8
Mass.....	12,610	1,743,209	138.24	-.7	(5/)	+11.7	+6.9
Mich.....	10,145	1,145,224	112.89	+3.8	+10.0	+40.6	+36.4
Minn.....	3,777	232,202	61.48	+1.0	+1.4	+13.0	+13.8
Miss.....	18,548	805,132	43.41	+.5	+.5	+11.4	+10.9
Mo.....	15,108	1,063,557	70.40	+.3	-1.0	+3.8	+3.9
Mont.....	1,358	106,703	78.57	+.2	+.3	+8.3	+6.9
Nebr.....	2,656	254,929	95.98	+1.3	+1.0	+10.1	+20.0
N. H.....	609	56,783	93.24	+.3	-16.8	+8.9	-10.1
N. J.....	8,698	854,769	98.27	+.2	-1.5	+6.1	+11.1
N. Mex. 3/.....	3,754	346,203	92.22	+.3	+.5	+8.9	+17.1
N. Y. 3/.....	34,722	4,383,700	126.25	-.5	+4.8	-.5	(5/)
N. C.....	21,887	1,459,726	66.69	-1.3	-8.4	+3.3	+1.6
N. Dak. 3/.....	1,633	210,629	128.98	+1.5	+16.5	+17.7	+20.4
Ohio.....	19,501	1,537,047	78.82	+.8	+3.3	+6.5	+11.9
Okla. 3/.....	14,132	1,585,011	112.16	+.8	+1.1	+12.5	+16.4
Oreg.....	8,050	554,928	68.94	+.7	+.3	+3.7	+11.3
Pa.....	20,534	1,591,406	77.50	-.3	+.4	+5.7	+17.8
P. R. 3/.....	20,897	180,260	8.63	(6/)	(6/)	-2.9	-2.5
R. I. 3/.....	2,844	270,012	94.94	-.1	(6/)	+4.5	+9.5
S. C.....	8,911	472,976	53.08	-.2	-2.9	+5.9	+9.6
S. Dak.....	1,113	77,202	69.36	+.6	+.4	+1.4	+1.7
Tenn.....	13,209	719,904	54.50	+.5	+1.4	+5.9	+14.0
Tex.....	9,767	557,926	57.12	+.2	+.1	+9.1	+8.6
Utah.....	5,005	336,588	67.25	+.9	-2.8	+6.9	+2.7
Vt. 3/.....	1,216	103,203	84.87	+2.1	+6.1	+19.2	+27.5
V. I.....	75	3,028	40.37	(7/)	(7/)	(7/)	(7/)
Va.....	6,879	473,946	68.90	-.4	+.1	+3.9	+7.2
Wash.....	18,147	1,101,925	60.72	+.8	+8.0	-2.1	+9.1
W. Va.....	5,833	297,868	51.07	-.1	-.2	-7.6	-8.2
Wis.....	6,245	763,255	122.22	+1.7	+6.4	+9.5	+19.9
Wyo.....	654	58,396	89.29	+2.2	+3.6	+4.8	+6.3

1/ All data subject to revision. 2/ Partly estimated. 3/ Represents aid to the permanently and totally disabled under program for aid to the aged, blind, or disabled or for such aid and medical assistance for the aged. 4/ Data for September; later data not available. 5/ Decrease of less than 0.05 percent.
6/ Increase of less than 0.05 percent. 7/ Percentage change not computed on fewer than 100 recipients.

Table 7. Aid to families with dependent children: Recipients and payments to recipients, by State, February 1965 1/

/Includes vendor payments for medical care and cases receiving only such payments/

State	Number of families	Number of recipients		Payments to recipients			Percentage change from--			
					Average per--		Jan. 1965 in--		Feb. 1964 in--	
		Total 2/	Children	Total amount	Family	Recipient	Number of recipients	Amount	Number of recipients	Amount
Total	1,056,156	4,423,988	3,311,689	$148,888,057	$140.97	$33.65	+1.2	+2.2	+6.8	+12.2
Ala. 3/	18,628	76,056	60,108	896,295	48.12	11.78	-.6	-.3	-16.7	-15.9
Alaska 3/ 4/	1,291	4,728	3,620	162,919	126.20	34.46	+1.9	+.1	+1.9	+2.0
Ariz. 3/	9,481	40,601	30,692	1,154,561	121.78	28.44	+.1	-.1	-3.4	-3.9
Ark.	7,328	30,374	22,846	505,928	69.04	16.66	+1.9	+2.4	+8.7	+7.3
Calif. 3/ 5/	135,351	561,775	413,942	25,114,874	185.55	44.71	+3.9	+4.8	+29.5	+29.3
Colo.	10,901	42,522	32,938	1,542,153	141.47	36.27	+1.3	+.9	+6.5	+11.0
Conn. 5/	14,903	59,963	43,584	2,806,566	188.32	46.80	-1.2	-1.2	+6.1	+9.4
Del. 5/	2,879	13,211	9,966	372,203	129.28	28.17	+3.3	+4.8	+5.1	+36.4
D. C.	4,228	20,319	16,386	665,599	157.43	32.76	+1.7	+1.8	+9.8	+9.9
Fla.	28,012	106,870	86,015	1,714,843	61.22	16.05	+.9	+1.4	+3.9	+3.3
Ga.	18,086	73,321	56,187	1,620,937	89.62	22.11	+1.6	+1.5	+20.6	+14.9
Guam 6/	115	595	497	7,722	67.15	12.98	---	---	---	---
Hawaii 5/	3,254	14,094	10,480	516,156	158.62	36.62	+1.0	-.2	+.3	+2.0
Idaho	2,635	10,160	7,406	392,835	149.08	38.66	+2.2	+1.9	-1.8	-4.7
Ill. 3/ 5/	56,073	264,552	203,771	11,866,709	211.63	44.86	+.9	+.3	+.2	+5.8
Ind. 3/	11,836	48,256	36,106	1,396,374	117.98	28.94	-.2	-.7	+2.2	+4.0
Iowa	10,962	44,013	32,016	1,700,359	155.11	38.63	+1.4	+2.2	+8.1	+30.6
Kans. 3/ 5/	8,844	37,546	28,722	1,466,262	165.79	39.05	+1.5	+1.7	+12.9	+15.8
Ky. 3/	21,015	82,112	59,059	2,143,959	102.02	26.11	+1.6	+8.6	+6.9	+9.0
La. 3/	23,955	104,748	79,455	2,449,046	102.24	23.38	+.2	+1.7	+3.5	+4.6
Maine	5,266	19,217	14,157	553,357	105.08	28.80	+1.0	+1.0	-3.7	-5.2
Md. 3/ 5/	19,380	83,188	63,922	2,770,251	142.94	33.30	+1.7	+2.7	+19.5	+22.1
Mass. 5/	25,301	94,889	71,029	4,572,829	180.74	48.19	+1.0	+4.1	+10.3	+8.8
Mich. 3/ 5/	40,342	166,046	122,183	5,979,339	148.22	36.01	+1.5	+2.1	+30.4	+27.3
Minn. 3/	13,865	50,953	39,712	2,578,959	186.00	50.61	+.3	+3.6	+11.8	+13.7
Miss.	20,633	82,417	65,940	818,661	39.68	9.93	+.2	+.2	+1.6	+5.5
Mo. 3/	26,107	107,158	81,970	2,590,993	99.25	24.18	-.1	+.1	+1.2	+1.9
Mont.	1,794	7,112	5,484	257,225	143.38	36.17	+.2	+.1	+1.4	+5.2
Nebr.	4,008	16,482	12,557	517,599	129.14	31.40	+2.4	+4.7	+12.8	+17.0
Nev.	1,275	5,234	4,136	162,887	127.75	31.12	+1.0	+.8	+10.7	+8.3
N. H.	1,088	4,516	3,376	196,806	180.89	43.58	+1.8	+1.5	+3.1	+3.0
N. J.	26,625	105,317	79,818	5,210,658	195.71	49.48	+.9	+.1	+9.9	+13.8
N. Mex. 3/	7,156	29,503	22,484	1,005,765	140.55	34.09	+.1	-.5	-3.7	+4.6
N. Y. 5/	122,364	529,889	387,745	24,037,266	196.44	45.36	+.1	+1.6	+7.6	+12.2
N. C. 3/	26,766	111,277	83,265	2,680,216	100.14	24.09	-.5	-2.2	-3.7	-1.9
N. Dak.	1,978	7,866	6,008	357,144	180.56	45.40	+1.6	+2.3	+14.7	+19.6
Ohio 5/	45,724	194,743	144,340	6,158,204	134.68	31.62	+4.0	+6.0	+25.8	+28.1
Okla. 3/ 5/	18,551	73,098	54,242	2,385,190	128.57	32.63	+.5	+1.6	+.8	-4.9
Oreg. 3/ 5/	8,250	33,489	24,371	1,309,282	158.70	39.10	+6.8	+6.7	+4.0	+9.2
Pa. 5/	69,257	307,675	220,510	9,878,692	142.64	32.11	-.8	-.1	-8.6	+1.8
P. R.	49,734	201,446	161,006	825,079	16.59	4.10	-.2	-.4	-4.5	+7.6
R. I. 5/	6,092	24,745	18,076	1,017,336	167.00	41.11	+1.6	-1.7	+3.2	+6.1
S. C.	7,412	29,694	23,885	464,345	62.65	15.64	+.3	-1.9	-7.6	-9.0
S. Dak.	3,005	11,185	8,420	351,942	117.12	31.47	+1.8	+2.1	+11.1	+15.6
Tenn. 3/	19,139	76,623	58,209	1,732,182	90.51	22.61	+.8	+1.9	-.7	+21.5
Tex.	20,233	92,549	69,750	1,725,720	85.29	18.65	+1.2	+1.4	+4.6	+9.6
Utah 3/ 5/	5,561	23,369	16,766	768,162	138.13	32.87	+2.4	+5.6	+10.2	+10.8
Vt.	1,410	5,418	3,978	161,174	114.31	29.75	0	+.2	+4.0	+3.1
V. I.	314	1,172	991	22,059	70.25	18.82	-3.1	-1.1	-.8	+10.3
Va. 3/	10,861	46,390	35,794	1,148,013	105.70	24.75	+.4	+.6	+2.6	+6.7
Wash. 3/ 5/	19,104	79,288	55,851	2,773,598	145.18	34.98	+4.3	+5.6	+10.6	+10.3
W. Va. 3/ 5/	25,569	118,060	81,498	3,078,557	120.40	26.08	+1.1	+1.4	-5.1	-7.3
Wis. 3/	11,296	44,643	33,713	2,161,540	191.35	48.42	+1.4	+2.3	+1.6	+2.6
Wyo.	919	3,521	2,707	140,727	153.13	39.97	+1.8	+4.7	+7.9	+9.4

1/ All data subject to revision. 2/ Includes as recipients the children and 1 or both parents or 1 caretaker relative other than a parent in families in which the requirements of such adults were considered in determining the amount of assistance. 3/ Includes data on foster-family care; see table 10. 4/ Partly estimated. 5/ Includes data on unemployed-parent segment; see table 8. 6/ Data for September; later data not available.

Table 8. Aid to families with dependent children, unemployed-parent segment: Recipients and payments to recipients, February 1965 1/

[Includes vendor payments for medical care and cases receiving only such payments]

State	Number of families	Number of recipients		Payments to recipients			Percentage change from--			
		Total 2/	Children	Total	Average per--		January 1965 in--		February 1964 in--	
					Family	Recipient	Number of recipients	Amount	Number of recipients	Amount
Total...	81,140	467,420	312,712	$15,538,606	$191.50	$33.24	+5.7	+7.5	+19.7	+29.6
Calif....	17,940	103,368	69,782	4,067,204	226.71	39.35	+10.8	+14.5	+172.3	+198.9
Conn.....	2,022	11,414	7,529	373,864	184.90	32.75	-4.2	-6.0	-20.7	-22.2
Del.....	453	2,763	1,913	72,902	160.93	26.39	+8.6	+12.9	-27.5	-10.0
Hawaii...	295	1,923	1,343	57,588	195.21	29.95	+.6	-1.8	-18.3	-20.1
Ill.....	6,558	42,143	29,286	1,752,058	267.16	41.57	+4.2	+1.8	-19.1	-16.1
Kans....	512	3,048	2,043	105,902	206.84	34.74	+11.5	+9.2	+19.0	+25.3
Md.....	728	4,225	2,803	121,991	167.57	28.87	+1.5	+3.1	-8.9	-6.8
Mass....	706	4,058	2,711	175,416	248.46	43.23	+10.7	+5.5	-7.5	+27.0
Mich....	4,097	25,436	17,395	799,257	195.08	31.42	+8.3	+9.7	(3/)	(3/)
N. Y....	16,689	96,091	64,779	3,314,508	198.60	34.49	+2.6	+5.5	-4.6	+2.2
Ohio....	5,371	30,459	20,363	876,100	163.12	28.76	+19.0	+19.4	(3/)	(3/)
Okla....	24	143	97	4,146	(4/)	(4/)	+30.0	+28.3	+41.6	+31.4
Oreg....	1,186	6,748	4,503	248,510	209.54	36.83	+17.7	+15.4	+3.3	+9.1
Pa.....	7,941	44,174	28,876	1,139,123	143.45	25.79	-1.3	-.7	-34.6	-29.5
R. I....	619	3,599	2,392	121,010	195.49	33.62	+3.7	-2.3	-14.8	-14.9
Utah....	1,277	6,914	4,657	123,815	96.96	17.91	+3.6	+8.9	+6.8	+8.3
Wash....	4,019	22,384	14,411	643,764	160.18	28.76	+10.6	+17.3	+10.9	+18.4
W. Va....	10,703	58,530	37,829	1,541,448	144.02	26.34	+1.3	+1.8	-6.4	-7.2

1/ Data for this segment of the program, shown separately here, are included in data for the total program. All data subject to revision. 2/ Includes as recipients the children and 1 or both parents or 1 caretaker relative other than a parent in families in which the requirements of such adults were considered in determining the amount of assistance. 3/ No program in operation in February 1964. 4/ Average payment not computed on base of fewer than 50 families.

Table 9. Aid to families with dependent children: Recipients and money payments to recipients under community work and training programs, by State, February 1965 1/

State	Number of families with an adult on work and training programs	Number of recipients				Money payments to recipients			
		Total 2/	Adults		Children	Total	For work performed on work and training programs	Average per family	
			On work and training programs	Other				Total	For work performed on work and training programs
Total.....	26,355	149,039	26,420	23,676	98,943	$4,542,725	$3,116,185	$172.37	$118.24
Calif.....	7,860	44,563	7,860	6,535	30,168	1,733,157	581,845	220.50	74.03
Ill.....	2,694	16,690	2,696	2,401	11,593	596,730	465,187	221.50	172.68
Kans.....	126	726	126	114	486	21,532	12,372	170.89	98.19
Md.....	142	820	142	140	538	25,914	13,655	182.49	96.16
Mich.....	(3/)	(3/)	(3/)	(3/)	(3/)	(3/)	(3/)	(3/)	(3/)
Ohio.....	3,294	18,995	3,357	2,957	12,681	535,232	485,627	162.49	147.43
Oreg.....	81	468	81	76	311	18,277	7,103	225.64	87.69
Pa.....	519	2,990	519	519	1,952	92,885	65,930	178.97	127.03
Wash.....	936	5,257	936	936	3,385	144,600	110,068	154.49	117.59
W. Va.....	10,703	58,530	10,703	9,998	37,829	1,374,398	1,374,398	128.41	128.41

1/ Represents data for community work and training programs under plans for such programs submitted under Section 409 of Social Security Act. 2/ Includes as recipients the children and 1 or both parents or 1 caretaker relative other than a parent in families in which the requirements of such adults were considered in determining the amount of assistance. 3/ Data not reported.

Table 10. Aid to families with dependent children receiving foster care: Recipients and payments for foster care, by State, February 1965 1/

State	Number of				Payments for foster care			
	Children receiving foster care			Families from which children were removed	Total amount	Average per child	In foster homes	In institutions
	Total	In foster homes	In institutions					
Total.....	5,832	2/ 4,594	2/ 252	2,437	$435,676	$74.70	2/ $296,128	2/ $40,468
Ala.....	7	7	0	4	256	(3/)	256	0
Alaska.....	69	69	0	25	5,979	86.65	5,979	0
Ariz.....	189	189	0	67	9,291	49.16	9,291	0
Calif.....	1,247	1,115	132	600	119,765	96.04	91,582	28,183
Ill.....	986	(2/)	(2/)	389	99,080	100.49	(2/)	(2/)
Ind.....	142	142	0	45	5,635	39.68	5,635	0
Kans.....	74	69	5	34	6,481	87.58	6,033	448
Ky.....	26	26	0	9	1,820	(3/)	1,820	0
La.....	544	517	27	231	32,485	59.72	29,595	2,890
Md.....	528	487	41	181	38,819	73.52	35,591	3,228
Mich.....	53	44	9	19	3,852	72.68	2,982	870
Minn.....	158	142	16	69	13,787	87.26	10,387	3,400
Mo.....	66	66	0	20	2,112	32.00	2,112	0
N. Mex.....	40	40	0	13	2,392	(3/)	2,392	0
N. C.....	11	11	0	2	457	(3/)	457	0
Okla.....	282	282	0	123	12,124	42.99	12,124	0
Oreg.....	83	83	0	35	5,628	67.81	5,628	0
Tenn.....	251	234	17	82	16,057	63.97	14,915	1,142
Utah.....	282	282	0	125	14,860	52.70	14,860	0
Va.....	52	52	0	20	2,321	44.63	2,321	0
Wash.....	568	568	0	264	31,412	55.30	31,412	0
W. Va.....	43	38	5	23	2,760	(3/)	2,453	307
Wis.....	131	131	0	57	8,303	63.38	8,303	0

1/ Data for this segment of the program, shown separately here, are included in data for the total program. All data subject to revision. 2/ Excludes Illinois; breakdown not available. 3/ Average payment not computed on base of fewer than 50 children.

Table 11. General assistance: Recipients and payments to recipients, by State, February 1965 1/

/Excludes vendor payments for medical care and cases receiving only such payments/

State	Number of--		Payments to recipients			Percentage change from--			
				Average per--		January 1965 in--		February 1964 in--	
	Cases	Recipients	Total amount	Case	Recipient	Number of recipients	Amount	Number of recipients	Amount
Total 2/	353,000	802,000	$23,426,000	$66.40	$29.22	-0.6	+1.0	-14.0	-6.1
Ala	68	68	895	13.16	13.16	(3/)	(3/)	(3/)	(3/)
Alaska	236	860	17,886	75.79	20.80	+5.8	+23.7	-16.3	-1.2
Ariz	2,201	5,337	117,268	53.28	21.97	-3.4	-1.3	-2.8	-.2
Ark	368	1,494	5,231	14.21	3.50	-8.1	-18.4	+5.3	-1.9
Calif	22,812	39,055	1,277,591	56.01	32.71	-17.1	-7.2	-52.5	-29.0
Colo	2,773	11,187	149,371	53.87	13.35	+22.3	+8.6	+22.3	+22.8
Conn	4/ 4,484	4/ 11,366	4/ 314,574	70.15	27.68	+5.3	+6.6	+12.9	+16.1
Del	1,576	2,924	88,039	55.86	30.11	-.1	+4.1	-3.5	-6.2
D. C	754	811	57,411	76.14	70.79	+2.1	+1.7	+27.9	+33.0
Fla. 5/	8,300	(6/)	249,000	---	---	---	---	---	---
Ga	2,556	6,428	76,761	30.03	11.94	-.8	+5.3	+.6	-4.1
Guam 7/	16	37	850	(3/)	(3/)	---	---	---	---
Hawaii	1,089	1,337	72,818	66.87	54.46	+.7	-3.4	-3.9	-.2
Ill	29,234	64,943	2,302,085	78.75	35.45	+.2	+.3	-6.9	-6.4
Iowa 5/	4,300	11,000	176,000	---	---	---	---	---	---
Kans	3,337	8,459	223,491	66.97	26.42	+1.5	+2.4	-5.6	+.3
Ky	1,611	4,935	52,449	32.56	10.63	+12.0	+.1	-21.1	-32.5
La	8,302	9,165	435,104	52.41	47.47	+1.2	+1.9	+3.2	+4.0
Maine	3,418	11,777	164,906	48.25	14.00	+8.8	-.3	+.1	+3.5
Md	7,509	8,727	557,469	74.24	63.88	+1.2	+2.5	+29.7	+30.4
Mass	8,320	18,281	606,482	72.89	33.18	+7.2	+4.5	-6.8	-3.1
Mich	22,015	66,563	1,700,710	77.25	25.55	-.1	+2.3	-37.9	-41.3
Minn	11,964	36,180	999,151	83.51	27.62	+2.3	(8/)	-1.8	-3.0
Miss	1,287	1,714	19,374	15.05	11.30	+4.8	+2.4	+11.0	+17.6
Mo	10,150	13,745	669,118	65.92	48.68	+2.4	+.3	+3.6	+4.4
Mont	1,676	5,335	92,840	55.39	17.40	+9.8	+11.7	-39.2	-15.3
Nev	375	824	21,042	56.11	25.54	0	-4.1	-20.2	+18.4
N. H	1,215	4,322	80,346	66.13	18.59	+1.8	+3.1	-2.8	-4.3
N. J. 9/	12,363	42,311	1,482,255	119.89	35.03	+4.1	+6.9	-2.5	+2.5
N. Mex	249	493	13,001	52.21	26.37	-11.0	+7.7	-63.6	-49.2
N. Y. 10/	49,968	106,429	4,194,418	83.94	39.41	-.3	+1.8	+15.4	+21.1
N. C	2,192	7,305	57,044	26.02	7.81	+11.2	+7.1	-9.8	-3.2
N. Dak	727	3,370	50,584	69.58	15.01	+9.7	+9.0	+5.2	+11.4
Ohio	29,852	97,467	1,987,058	66.56	20.39	-4.8	+1.1	-24.3	-24.7
Okla	7,927	(6/)	95,037	11.99	---	---	-7.6	---	-9.3
Oreg	6,187	(6/)	362,287	58.56	---	---	+1.8	---	+11.3
Pa	37,508	45,541	2,457,290	65.51	53.96	+.7	+1.7	-5.1	+4.0
P. R	1,112	1,112	9,342	8.40	8.40	-17.8	-19.8	+14.4	+27.9
R. I	3,291	7,820	202,751	61.61	25.93	+1.5	-1.0	+19.1	+18.8
S. C	1,345	1,755	34,216	25.44	19.50	+13.9	-14.3	-6.5	-28.1
S. Dak	771	2,847	28,105	36.45	9.87	+25.5	+19.2	+37.1	+21.9
Tenn	2,258	4,034	48,213	21.35	11.95	+4.1	-8.5	-34.3	+14.9
Tex. 11/ 12/	9,100	(6/)	250,000	---	---	---	---	---	---
Utah	2,172	6,502	163,610	75.33	25.16	+2.2	+3.2	+9.6	+11.7
Vt. 11/ 12/	1,000	(6/)	33,000	---	---	---	---	---	---
V. I	177	183	6,447	36.42	35.23	+3.4	+.2	+19.6	+32.8
Va	2,888	7,642	141,719	49.07	18.54	+4.6	-4.7	-18.2	+.9
Wash	10,490	17,820	730,258	69.61	40.98	-17.1	-5.9	+6.6	+18.1
W. Va	1,672	2,774	61,365	36.70	22.12	+3.7	+3.0	+22.5	+24.0
Wis	7,853	24,668	728,409	92.76	29.53	+2.5	-.7	-18.9	-18.2
Wyo	759	3,248	68,512	90.27	21.09	+19.1	+21.4	+12.8	+5.0

1/ All data subject to revision. 2/ Partly estimated; does not represent sum of State figures because totals exclude for New Jersey an estimated number of cases and persons receiving only medical care, hospitalization, and/or burial and payments for such services; recipient count also includes an estimate for States not reporting such data. Excludes Idaho, Indiana, and Nebraska; data not available. 3/ Average payment not computed on base of fewer than 50 recipients; percentage change on fewer than 100 recipients. 4/ About 8 percent of this total is estimated. 5/ Partly estimated. 6/ Data not available. 7/ Data for September; later data not available. 8/ Decrease of less than 0.05 percent. 9/ Includes an unknown number of cases and persons receiving only medical care, hospitalization, and/or burial, and total payments for such services. 10/ Includes an unknown number of cases and persons receiving only medical care. 11/ Estimated on basis of reports from sample of local jurisdictions. 12/ Data for January; February data not available.

Table 12. Amount of vendor payments for medical care for recipients of public assistance, by program and State, February 1965 1/

State	Old-age assistance	Medical assistance for the aged	Aid to the blind	Aid to the permanently and totally disabled	Aid to families with dependent children	General assistance 1/
Total.....	$35,931,854	$42,507,140	$1,031,481	$10,340,315	$11,924,244	$9,882,000
Ala.....	1,149,679	70,803	5,450	75,349	1,154	68
Alaska 2/3/.....	30,009	---	---	9,000	17	54,426
Ariz.....	67,469	---	---	---	---	---
Ark.....	660,058	161,397	19,103	194,354	39,908	27,490
Calif.....	3,770,927	8,234,491	256,110	1,105,340	1,329,055	131,778
Colo.....	664,790	3/4/ 830,000	3,555	87,045	107,679	85,304
Conn.....	127,951	4/ 1,278,727	17,550	303,535	375,586	---
Del.....	33,097	21,152	2,208	---	---	---
D. C.....	56,518	123,361	506	36,399	2,475	133
Fla. 2/.....	1,229,333	238,367	24,125	240,075	73,223	---
Ga.....	904,971	---	12,733	166,197	---	---
Guam 5/.....	417	368	---	---	---	---
Hawaii 2/.....	16,996	164,596	2,202	96,185	80,348	21,366
Idaho.....	55,397	332,419	85	23,489	---	---
Ill. 2/.....	2,603,320	599,907	74,100	826,998	1,615,195	905,565
Ind.....	873,131	(6/)	37,227	117,498	222,224	---
Iowa.....	1,045,218	570,868	12,151	---	169,695	7/ 279,000
Kans. 2/.....	463,107	4/ 396,853	9,093	125,688	225,820	144,667
Ky. 2/.....	867,581	403,199	25,343	164,995	342,186	---
La.....	2,309,741	92,890	7,961	112,422	43,596	5,519
Maine 2/.....	322,730	88,697	3,224	44,187	26,330	90,287
Md. 2/.....	111,479	8/ 381,560	3,993	87,523	---	1,361
Mass.....	1,014,494	4/ 4,758,476	17,341	894,196	462,293	215,479
Mich.....	881,533	2,367,513	25,656	272,937	302,527	417,556
Minn.....	993,410	4/ 2,585,588	46,005	49,900	390,668	738,293
Miss.....	155,957	---	2,591	---	---	---
Mo.....	846,773	---	---	43,267	36,478	19,830
Mont.....	931	---	550	427	578	384,883
Nebr.....	656,783	97,331	34,509	130,793	54,618	---
Nev.....	62,133	---	2,857	(9/)	10,652	163,076
N. H.....	95,514	73,122	5,435	9,770	32,257	---
N. J.....	336,581	4/ 1,299,536	11,298	258,818	284,982	306,807
N. Mex. 2/.....	219,920	---	7,540	82,880	132,800	5,300
N. Y. 2/.....	1,031,586	4/ 9,652,997	78,818	1,831,085	2,397,886	280,429
N. C.....	319,853	184,105	28,977	140,077	133,532	100,466
N. Dak. 2/.....	132,956	4/ 285,712	1,010	95,419	51,763	20,679
Ohio.....	1,714,189	---	47,087	295,779	568,847	1,285,572
Okla. 2/.....	1,620,182	163,207	32,246	275,729	17,959	---
Oreg.....	144,087	616,519	5,780	184,949	111,161	75,785
Pa.....	702,304	2,482,470	71,283	401,834	926,514	1,151,627
P. R. 2/.....	21,094	97,958	---	---	---	---
R. I. 2/.....	100,837	224,977	1,768	54,690	127,932	80,688
S. C.....	308,581	182,584	14,592	70,289	14,812	13,848
S. Dak.....	106,620	27,160	---	---	---	108,156
Tenn.....	555,460	296,400	3,816	29,060	49,960	---
Tex.....	2,895,200	---	---	---	---	---
Utah.....	59,248	253,954	2,632	141,542	106,480	784
Vt. 2/.....	201,172	44,227	1,535	30,730	---	---
V. I.....	1,332	1,206	4	75	157	171
Va.....	247,763	204,018	13,122	91,230	46,400	17,820
Wash.....	631,087	1,491,849	14,289	534,834	337,553	141,677
W. Va.....	153,201	334,031	4,740	63,371	345,568	15,103
Wis.....	2,303,897	776,151	38,008	527,377	313,150	167,074
Wyo.....	53,257	16,394	1,273	12,978	12,226	48,133

1/ Data incomplete. Some States do not report these data and for some the data represent only partial reporting. The total includes an estimated amount for these States. 2/ Except for aid to families with dependent children and general assistance, data represent payments for recipients of the specified type of assistance under program for aid to the aged, blind, or disabled or for such aid and medical assistance for the aged. 3/ Estimated. 4/ Includes money payments not subject to Federal participation as follows: An unknown amount in Colorado, $66 in Connecticut, $11,107 in Kansas, $97,877 in Massachusetts, $35,542 in Minnesota, $8,041 in New Jersey, $47,527 in New York, and $2,835 in North Dakota. 5/ Data for September; later data not available. 6/ Program in operation but no payments made in February. 7/ Partly estimated. 8/ Data for January; February data not received. 9/ No program for aid to the permanently and totally disabled.

Table 13. Average payment per recipient for all assistance, for money payments, and for vendor payments for medical care, by program and State, February 1965 1/

State	Old-age assistance				Aid to the blind			Aid to the permanently and totally disabled			Aid to families with dependent children (per recipient)		
	All assistance	Money payments to recipients	Vendor payments for medical care	Medical assistance for the aged	All assistance	Money payments to recipients	Vendor payments for medical care	All assistance	Money payments to recipients	Vendor payments for medical care	All assistance	Money payments to recipients	Vendor payments for medical care
Total....	$79.15	$62.44	$16.71	$184.54	$86.27	$75.51	$10.76	$81.04	$61.69	$19.35	$33.65	$30.96	$2.70
Ala.....	67.86	57.55	10.31	288.99	68.87	65.88	2.99	46.87	41.78	5.09	11.78	11.77	.02
Alaska 2/ 3/.....	91.89	69.95	21.94	(4/)	82.01	82.01	---	111.47	67.35	44.12	34.46	34.45	(5/)
Ariz.....	63.32	58.21	5.12	(4/)	71.20	71.20	---	67.33	67.33	---	28.44	28.44	---
Ark.....	62.33	51.12	11.20	54.92	70.16	60.25	9.90	59.21	38.76	20.45	16.66	15.34	1.31
Calif.....	111.40	97.56	13.84	289.33	140.02	119.32	20.70	114.51	97.33	17.18	44.71	42.34	2.37
Colo.....	96.01	80.79	15.22	(6/)	85.75	71.59	14.16	76.14	61.73	14.41	36.27	33.73	2.53
Conn.....	80.73	62.40	18.33	197.43	122.44	65.65	56.80	82.19	44.03	38.15	46.80	40.54	6.26
Del.....	76.33	52.81	23.52	306.55	87.81	80.37	7.43	75.91	75.91	---	28.17	28.17	---
Dist. of Col.....	87.93	63.86	24.07	313.90	79.03	76.54	2.49	82.62	71.36	11.26	32.76	32.64	.12
Fla. 2/.....	66.32	49.56	16.76	346.46	69.08	59.77	9.31	70.26	56.43	13.83	16.05	15.36	.69
Ga.....	57.11	47.27	9.84	(4/)	59.75	55.76	3.98	60.56	54.40	6.16	22.11	22.11	---
Guam 7/.....	31.83	29.01	2.82	(8/)	(8/)	(8/)	---	25.18	25.18	---	12.98	12.98	---
Hawaii 2/.....	73.60	59.23	14.37	234.47	101.38	72.41	28.97	131.67	48.10	83.57	36.62	30.92	5.70
Idaho.....	73.55	60.93	12.61	152.98	75.45	74.82	.62	56.74	49.00	7.74	38.66	38.66	---
Ill. 2/.....	93.66	47.30	46.36	429.73	94.26	64.13	30.13	96.51	68.18	28.33	44.86	38.75	6.11
Ind.....	83.37	44.95	38.41	(9/)	83.55	62.59	20.96	129.50	48.69	80.81	28.94	24.33	4.61
Iowa.....	93.51	55.41	38.10	73.19	101.77	91.21	10.57	81.73	81.73	---	38.63	34.78	3.86
Kans. 2/.....	91.10	69.90	21.20	146.71	94.03	76.37	17.66	113.66	88.55	25.11	39.05	33.04	6.01
Ky. 2/.....	64.72	49.91	14.81	39.76	72.85	62.67	10.18	77.75	62.54	15.21	26.11	21.94	4.17
La.....	85.06	67.41	17.66	174.28	81.36	78.50	2.87	58.66	52.90	5.76	23.38	22.96	.42
Maine 2/.....	82.56	53.07	29.50	243.67	82.60	72.10	10.50	89.21	69.72	19.49	28.80	27.43	1.37
Md. 2/.....	73.39	62.13	11.26	10/34.69	81.34	71.02	10.32	79.80	68.49	11.31	33.30	33.30	---
Mass.....	89.67	70.34	19.33	168.95	133.25	125.65	7.61	138.24	67.33	70.91	48.19	43.32	4.87
Mich.....	97.83	79.87	17.96	408.83	95.82	80.49	15.33	112.89	85.98	26.90	36.01	34.19	1.82
Minn.....	83.74	52.85	30.89	199.75	110.70	66.68	44.02	61.48	48.27	13.21	50.61	42.95	7.67
Miss.....	39.28	37.14	2.13	(4/)	44.45	43.47	.98	43.41	43.41	---	9.93	9.93	---
Mo.....	66.80	58.50	8.30	(4/)	75.00	75.00	---	70.40	67.53	2.86	24.18	23.84	.34
Mont.....	71.98	71.80	.18	(4/)	86.64	84.44	2.20	78.57	78.26	.31	36.17	36.09	.08
Nebr.....	92.77	40.26	52.52	334.47	109.74	54.62	55.13	95.98	46.74	49.24	31.40	28.09	3.31
Nev.....	89.64	65.97	23.67	(4/)	114.42	96.11	18.31	(4/)	(4/)	(4/)	31.12	29.09	2.04
N. H.....	101.82	80.09	21.73	51.03	105.78	85.42	20.36	93.24	77.20	16.04	43.58	36.44	7.14
N. J.....	86.76	62.43	24.33	244.50	88.35	76.22	12.14	98.27	68.52	29.76	49.48	46.77	2.71
N. Mex. 2/.....	79.88	58.61	21.27	(4/)	96.04	74.19	21.86	92.22	70.14	22.08	34.09	29.59	4.50
N. Y. 2/.....	91.86	73.42	18.44	290.86	111.46	85.99	25.47	126.25	73.52	52.74	45.36	40.84	4.53
N. C.....	60.18	52.68	7.50	304.81	69.57	63.74	5.82	66.69	60.29	6.40	24.09	22.89	1.20
N. Dak. 2/.....	103.68	77.91	25.77	218.60	94.43	80.96	13.47	128.98	70.55	58.43	45.40	38.82	6.58
Ohio.....	86.59	65.79	20.80	(4/)	84.08	69.69	14.38	78.82	63.65	15.17	31.62	28.70	2.92
Okla. 2/.....	96.39	76.81	19.58	155.88	122.10	102.44	19.66	112.16	92.65	19.51	32.63	32.38	.25
Oreg.....	71.55	57.54	14.01	151.89	91.33	78.57	12.76	68.94	45.96	22.98	39.10	35.78	3.32
Pa.....	78.93	63.66	15.26	243.91	75.84	71.80	4.04	77.50	57.93	19.57	32.11	29.10	3.01
P. R. 2/.....	9.51	8.82	.69	31.56	8.48	8.48	---	8.63	8.63	---	4.10	4.10	---
R. I. 2/.....	94.83	77.71	17.12	205.27	92.90	75.40	17.50	94.94	75.71	19.23	41.11	35.94	5.17
S. C.....	52.16	40.07	12.09	193.01	62.44	54.54	7.90	53.08	45.19	7.89	15.64	15.14	.50
S. Dak.....	84.98	69.98	15.00	49.83	69.57	69.57	---	69.36	69.36	---	31.47	31.47	---
Tenn.....	57.51	45.10	12.41	35.45	55.84	54.04	1.80	54.50	52.30	2.20	22.61	21.95	.65
Tex.....	70.13	57.55	12.57	(4/)	69.56	69.56	---	57.12	57.12	---	18.65	18.65	---
Utah.....	68.60	56.32	12.28	112.17	71.96	56.30	15.67	67.25	38.97	28.28	32.87	28.31	4.56
Vt. 2/.....	84.67	47.47	37.20	353.82	73.60	60.81	12.79	84.87	59.60	25.27	29.75	29.75	---
V. I.....	40.95	37.95	3.00	8.87	(8/)	(8/)	(8/)	40.37	39.37	1.00	18.82	18.69	.13
Va.....	64.20	45.46	18.74	79.69	70.57	59.02	11.55	68.90	55.64	13.26	24.75	23.75	1.00
Wash.....	80.47	61.15	19.32	150.72	87.42	66.06	21.36	60.72	31.25	29.47	34.98	30.72	4.26
W. Va.....	49.92	39.05	10.86	29.22	47.96	41.98	5.98	51.07	40.20	10.86	26.08	23.15	2.93
Wis.....	111.77	31.16	80.61	156.55	98.70	50.89	47.81	122.22	37.77	84.45	48.42	41.40	7.01
Wyo.....	90.45	68.68	21.77	(8/)	94.71	72.76	21.95	89.29	69.45	19.84	39.97	36.50	3.47

1/ Averages based on cases receiving money payments, vendor payments for medical care, or both. Money payments may also include small amounts for assistance in kind and vendor payments for other than medical care. Averages for general assistance not computed because of difference among States in policy or practice regarding use of general assistance funds to pay medical bills for recipients of the special types of public assistance. 2/ Except for aid to families with dependent children, data for each program represent average payments for recipients of the specified type of assistance under program for aid to the aged, blind, or disabled or for such aid and medical assistance for the aged. 3/ Partly estimated. 4/ No program in operation. 5/ Less than 1 cent. 6/ Estimated. 7/ Data for September; later data not available. 8/ Average payment not computed on base of fewer than 50 recipients. 9/ Program in operation but no payments made in February 1965. 10/ Data for January; data for February not received.

Old-age, survivors, and disability insurance benefits, summary data, February 1965

CURRENT MONTH DATA

Type of benefit	Benefits awarded in February 1965		Benefits in current-payment status, end of February 1965			Amount of benefits paid 1/ in February 1965 (in thousands)
	Number	Average amount	Number	Monthly rate (in thousands)	Average amount	
Total, OASI and DI	293,533	---	---	---	---	$1,396,633
Total, OASI	245,398	---	---	---	---	1,274,543
Monthly benefits, OASI and DI	214,305	---	19,929,858	$1,338,181	---	1,380,318
Monthly benefits, OASI	166,170	---	18,338,980	1,235,198	---	1,258,228
Monthly benefits, DI	48,135	---	1,590,878	102,983	---	122,090
Old-age (retired-worker)	79,744	$83.03	10,736,956	835,446	$77.81	843,202
Disability (disabled-worker)	25,261	92.53	909,941	82,909	91.11	97,611
Wife's or husband's (OASI and DI)	31,090	39.39	2,786,283	110,904	39.80	114,541
Wife's or husband's (OASI)	24,660	40.83	2,604,153	105,031	40.33	107,343
Wife's or husband's (DI)	6,430	33.85	182,130	5,873	32.24	7,198
Widow's or widower's	23,542	73.85	2,179,970	148,285	68.02	153,868
Parent's	212	80.24	36,120	2,534	70.15	2,726
Child's (OASI and DI)	46,030	---	2,808,774	130,095	---	138,520
Child's (OASI--total)	29,586	---	2,309,967	115,894	---	121,239
Child's (OASI--life) 2/	7,192	29.53	425,555	12,034	28.28	12,609
Child's (OASI--survivor) 2/	22,394	53.50	1,884,412	103,859	55.11	108,630
Child's (DI)	16,444	28.08	498,807	14,202	28.47	17,281
Mother's	8,426	61.77	471,814	28,009	59.36	29,850
Lump-sum death payments	79,228	3/217.11	---	---	---	16,315

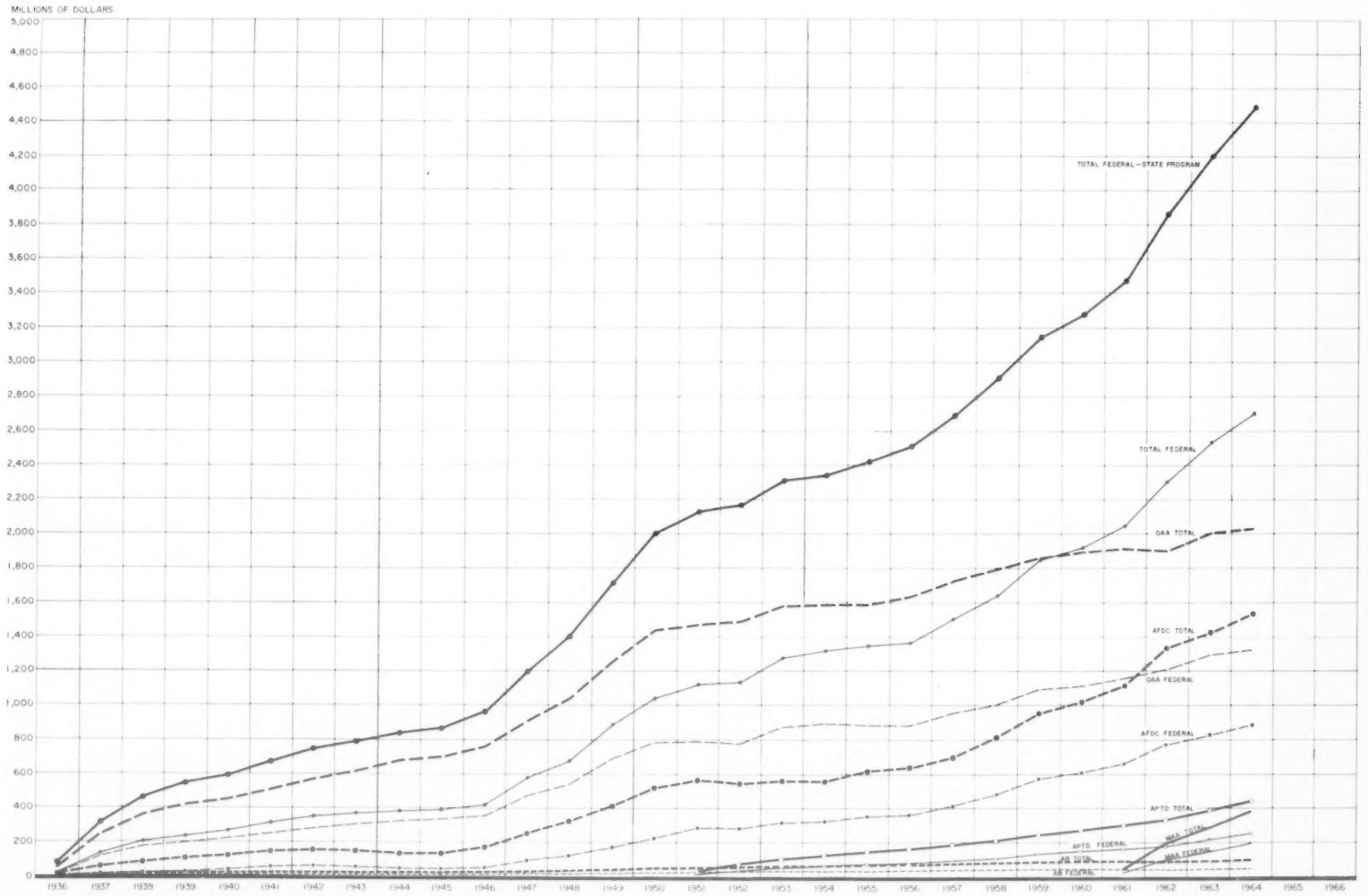
COMPARATIVE DATA

Item	February 1965	January 1965	February 1964
Number of benefits in current-payment status, end of month:			
Total, OASI and DI	19,929,858	19,879,857	19,204,813
Total, OASI	18,338,980	18,301,623	17,737,592
Total, DI	1,590,878	1,578,234	1,467,221
Amounts of benefits paid (in thousands):			
Total,OASI and DI	$1,396,633	$1,379,704	$1,326,056
Total, OASI	1,274,543	1,264,034	1,220,693
Total, DI	122,090	115,669	105,363
Number of old-age (retired-worker) benefits:			
Awarded	79,744	95,181	85,932
In current-payment status, end of month	10,736,956	10,709,916	10,354,133
Average old-age (retired-worker) benefit:			
Awarded	$83.03	$87.58	$83.24
In current-payment status, end of month	77.81	77.72	77.14
Number of disability insurance (disabled-worker) benefits:			
Awarded	25,261	17,744	17,297
In current-payment status, end of month	909,941	902,099	834,936
Average disability insurance (disabled-worker) benefit:			
Awarded	$92.53	$93.24	$94.77
In current-payment status, end of month	91.11	91.13	90.65
Number of persons aged 62 and over receiving monthly benefits, end of month (OASI and DI) 4/	15,611,000	15,569,000	15,034,000
Number of persons aged 65 and over receiving monthly benefits, end of month (OASI and DI) 4/	13,732,000	13,697,000	13,249,000
Assets of trust funds, end of month (in millions):			
OASI	$18,948	$17,945	$18,235
DI	1,972	1,939	2,188

1/ Exceeds monthly amount of benefits in current-payment status because initial payments include amounts payable for prior months. Distribution by type of monthly benefit estimated.
2/ Distribution by type of claim for OASI child's benefits estimated.
3/ Average lump-sum per worker; 75,146 deceased workers represented in the current month's lump-sum awards.
4/ Numbers estimated to the nearest thousand.

Source: Division of the Actuary, Social Security Administration.

ANNUAL ASSISTANCE EXPENDITURES FOR PUBLIC ASSISTANCE PAYMENTS AND AMOUNTS FROM FEDERAL FUNDS, BY PROGRAM, FISCAL YEARS 1936 TO DATE



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